



**Arizona Supreme Court  
Administrative Office of the Courts  
Adult Probation Services Division  
Kathy Waters, Division Director**

**JANUARY 2018**

**PIMA COUNTY ADULT PROBATION DEPARTMENT  
Operational Review Final Report**

**Published By:** Adult Probation Services Division  
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**Pima County Adult Probation Department  
Operational Review Final Report**

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## **EXECUTIVE SUMMARY**

### **Overview**

Arizona's adult probation system is decentralized, with each of the 15 local probation departments reporting directly to the presiding judge of the superior court or court administrator in their respective county. In accordance with the administrative and supervisory authority established under Article VI, Section 3 of the Arizona Constitution and in cooperation with the local probation departments, the AOC has developed and implemented a comprehensive operational review process.

### **Objective**

The APSD's operational review team conducts reviews in accordance with the Arizona Judicial Department's *Advancing Justice Together: Courts and Communities* strategic agenda. Operational reviews assess and document adult probation department's operational and program performance to assist in building effective community supervision practices. The objective of the review team is to ensure accountability and compliance with Arizona Revised Statutes (A.R.S.), the Arizona Code of Judicial Administration (ACJA), Administrative Orders (AO), Administrative Directives (AD), Arizona Rules of Court, approved program plans, funding agreements, and local policies and procedures. The review is designed to identify areas of non-compliance and make recommendations for corrective action, while promoting an atmosphere of collaboration and facilitation of technical assistance. To this end, the review team inspects the department's policy manual and response to the SAQ, MAS Questionnaire, Officer Safety Questionnaire, reviews case files, program files and all correspondence and reports submitted to the APSD. The review team also conducts MAS and Firearms verifications onsite with appropriate staff working with Minimum Accounting Standards (MAS) and Firearms/Ammunition and Defensive Tactics.

The on-site portion of the Pima County Adult Probation Department operational review was conducted June 26 through 30, 2017 and July 10, 2017. Pre-review work began in February 2017. The review team consisted of Maria Amaya-Aguilar, Susan Alameda, Carol Banegas-Stankus, Shanda Breed, DeAnna Faltz, Krista Forster, Dori Littler, Carissa Moore, Jane Price and Joshua Welker. After the Final Report is published, the review team and AOC staff will work collaboratively with the department to develop a corrective action plan to assist the department in resolving all issues identified in this report.

### **Overall Conclusion**

Number of Standards Exceeded:	0
Number of Standards Met:	11
Number of Standards Not Met:	31
Number of Standards Not Applicable:	3

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## **ACCOMPLISHMENTS**

The Pima County Probation Department reported the following as their 2016 accomplishments:

- “Completed 4,554 Presentence Reports
- Supervised 8,446 Probationers
- Collected \$1,391,835 in Restitution
- Collected \$3,242,101 in Fees, Fines & Reimbursements
- Collected \$80,592 in Restitution Court
- 155,243 Community Restitution Hours Completed
- Maintained a Probation Revocation Rate Under 25%
- Updated Court Services Division Operations and Reference Manuals
- Updated Presentence Report Intake Packets
- Incorporated the Domestic Violence Screening Instrument into the Presentence Report
- Implemented e-Discovery/e-Disclosure
- Replaced Outdated Netbooks with State-of-the-Art Laptops for Field Officers
- Awarded Victim Services Grant to Increase Efforts to Notify and Contact Victims
- Actively Participated in the MacArthur Foundation’s Safety and Justice Challenge
- Expanded the Implementation of Effective Practices in Correctional Supervision (EPICS) II Training
- Updated Field Officers’ Core Subject Training
- Continued the Department Quality Self-Audits”

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## **ADMINISTRATION AND MANAGEMENT**

Each probation department fulfills a variety of general administrative and management functions which directly affect the department's performance and effectiveness in its supervision of probationers. Many of these functions are accomplished in accordance with Statutes, the ACJA, AOs, ADs, funding agreements, and local policies and procedures. The review team assessed the department's compliance with administrative and management functions in the following areas: departmental policies and procedures, officer certification, education and training requirements for department staff, general reporting obligations, MAS, supervisory case file review, and pre-sentence investigation (PSI) reporting.

### **Policies and Procedures**

Pursuant to [ACJA § 6-105\(D\)\(2\)\(b\)](#)

#### **Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The AOC reviewed policies from the department's policy and procedure manual, including policies revised since 2013. The department should be commended for the excellent policies and procedures that comply with codes, statutes, and Administrative Orders. There are seven policies that require revisions as described below.

<b>Policy and Title</b>	<b>Recommended Revisions</b>
Policy submitted for Jail-Minimum Supervision- Case Management	Section I A 1 "If in custody, a probationer will be seen within 30 days prior to his release." This section does not address minimum supervision requirements for probationer incarcerated in jail per ACJA § 6-201.01 (K)(2) and ACJA 6-202.01 (N)(2).
Classification	Supervision Level Table Minimum- after "...visual contact shall be varied..." add initial residence check within 60 days. Supervision Level Table Medium- after "...visual contact shall be varied..." add initial residence check within 30 days. Supervision Level Table Maximum- after "...visual contact shall be varied..." add initial residence check within 30 days.

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<b>Policy and Title</b>	<b>Recommended Revisions</b>
ICE Caseload	Section II C- add "Protocols for Identity & Legal Status Determination of Adult Probationers."
Intercounty and Interstate Compact Transfers	Section III A 2 a- delete 120 days and add 180 days. Section III A 2 b- refer to ACJA § 6-211 for the entire definition and insert the entire definition in this section. Section III B 1- in the second sentence that references code "...section 6-211..." add H. 1-6. Section III B 3- It is recommended that ACJA 6-211 L. is quoted in this section. Section III B 4 b- refer reader to ACJA 6-211 L. 2. c. Section III C 2- the language "If this fee cannot be paid..." What fee is the policy referencing? If it is an error, please remove the language, if not an error, please describe the fee.
Drug Treatment Education Fund (DTEF)	The section of the Field Services Operation Manual that addresses DTEF does not provide specific direction for probation officers to enter DTEF cases in APETS. The department's Ability to Pay Determination Worksheet needs updating to reflect the latest Federal Poverty Guidelines.
Appendix 2: EPICS II Supervisor Discussion Questions	Question 11 a and b- Change STARR to EPICS II Add "c" to state- Are you utilizing EPICS II buttons in APETS?
EBP Basic Term	4 <sup>th</sup> Paragraph Criminogenic- "...characteristics or..." add crime producing.

**The department reported that the following policies have been revised:** Domestic Violence and Aggravated DUI

**Department Response:** A copy of the Departments updated Field Services Manual has been provided for review and all recommendations as stated above have been incorporated. The Department also provided a copy of the revised Domestic Violence and Aggravated DUI policies. Operational Review staff reviewed the submitted policies and determined that the policies meet minimum standards as required by statute and code.

**Required Corrective Action:** None required.

**Recommendation:** The Department should review all applicable policies that may be effected by code revisions. Although not required, it is recommended that policies include a requirement to enter data into the applicable APETS screens to use as a data collecting resource and quality assurance tool.

## **Employment**

Pursuant to [ACJA § 6-106\(H\)\(3\)\(b-c\)](#), [ACJA § 6-106\(F\)\(3\)\(a\)](#), and [ACJA § 6-106\(H\)\(1 through 8\)](#)

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**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Forty-five personnel files were selected for review. Thirty-two files consisted of probation officers and thirteen surveillance officers. Fifteen of the 45 probation/surveillance officers were hired prior to June 2013; therefore, some of the requirements below are not applicable and are marked as such; the results are as follows:

Employment Qualification Review				
Requirement	# of Files	% Compliant	No	N/A
Application for Employment Completed	45	100%	0	0
Verification of Bachelor's Degree-for PO	32	100%	0	13
Verification High School Diploma/GED-for SO	13	100%	0	32
National and State Criminal History Check before hire	45	100%	0	0
Before hire, was a driving records check through AZ MVD and any other previous state of residence conducted	30	72%	12	3

**Department Response:** "The department has modified its criminal history record check protocols on probation and surveillance officer applicants to include Department of Motor Vehicle (DMV) records in all states in which the applicant has lived. The chief probation officer personally reads all background reports and will audit for out-of-state DMV checks where appropriate. In addition, the department's background investigation written protocols have been modified to include this requirement (see below - new language in red). Finally, our security personnel running the record checks have been notified of this requirement and have received a copy of the revised protocols.

**Intermittent Background Investigator Protocols for PO/SO Applicants**

CPO or division director meets with applicant; makes conditional offer of employment subject to successful completion of drug test, medical certification of fitness, background investigation, and psychological evaluation.

Full criminal history, including Arizona DMV and DMV in all states previously lived in, credit report, and background questionnaire are given to the assigned investigator. The investigator schedules initial meeting with applicant (at probation office, library, etc.), reviews background questionnaire to fill gaps, and clarifies issues or concerns. The investigator then:

- a. Contacts prior employers, interviews co-workers and supervisors and reviews HR file. If applicant is currently employed, verifies current salary.
- b. Verifies education and confirms university is accredited. Obtains transcript from the university (instructs applicant to have a transcript sent directly to HR).
- c. Checks civil records for history of being sued or filing a suit.



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- d. Explores bankruptcy records if reflected on credit report.
- e. Researches applicant on the Internet.
- f. Canvases the applicant's neighborhood to gauge reputation in the community.
- g. Conducts reference checks.
- h. Second interview, by appointment, at applicant's home.
- i. Obtains CPO's permission to drive beyond County boundaries.
- j. Keeps records of mileage and time worked.
- k. Strives to report to CPO within three weeks.

David Sanders, CPO desk: 724-6355/cell: 631-9207

Lisa Ponder-Gilby, HR Liaison desk: 724-3868"

**Required Corrective Action:** None required.

**Recommendation:** Checklists help ensure that personnel meet all the required standards prior to personnel being hired. Also, consider the implementation of a biannual review process to guarantee continued compliance and to rectify any deficiencies discovered during the review process.

### **Officer Certification/COJET/Training**

Pursuant to [ACJA § 6-106 \(J\)\(1\)\(b\)](#), [ACJA § 6-104 \(F\)\(1\)](#) adopted via [AO 2006-99](#), [ACJA § 6-104 \(G\)\(1\)\(a\)](#), [ACJA § 1-302 \(K\)\(4\)](#), and [ACJA § 6-107 \(E\)](#)

#### **Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The results for the 45 files reviewed are listed below.

<b>Officer Certification Training</b>					
<b>Requirement</b>	<b># of Files</b>	<b>% Compliant</b>	<b>No</b>	<b>NA</b>	<b>Total</b>
Eight (8) hours of officer safety training within 30 days of hire	11	27%	30	4	45
Completion of PO Certification Academy within one year of the date of hire/date in position	29	100%	0	16	45
Certification requested by CPO after one year of service has been completed from hire date/date in position	38	100%	0	7	45
Completion of IPS Academy within one year of hire date	12	100%	0	33	45

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**Department Response:** The department reported that in 30 cases depending on the number of participants in the class, the officer safety training material could be covered in class in four to six hours.

**AOC Response:** In accordance with ACJA § 6-107(E)(1) “The chief probation officer or director of juvenile court services shall ensure, that within 30 days of appointment, an officer receives a minimum of eight hours of officer safety training.” Thereby, less than the minimum requirement of eight hours of safety training is not acceptable.

**Department 2<sup>nd</sup> Response:** “The timeliness of safety training was satisfactory but the duration did not meet the eight-hour requirement. We have developed a Certification Log (see below) that requires the new officer to certify having received the eight hours of training which is confirmed by the signature of training staff. The division director will audit for compliance on a biannual basis.”

**The Adult Probation Department of the Superior Court in Pima County  
New Officer Certification Log - Initial 8-Hour Safety Training**

Officer's Name	Officer's Signature	Hire Date	Training Date	Trainer's Signature

**Required Corrective Action:** None required.

**Recommendation:** Consider the implementation of a biannual review process to guarantee continued compliance and to rectify any deficiencies discovered during the review process. Also, checklists help ensure that personnel meet all the ongoing standards and quality assurance process.

## Continuing Employment

Pursuant to [ACJA § 6-106 \(J\)\(1\)\(f\)](#), [ACJA §1-302](#), and [ACJA § 6-107\(h\)\(7\)\(a\) & \(b\)](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Below are the findings of the review of 45 personnel files.

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<b>Biannual Criminal History &amp; MVD Check</b>				
<b>Requirement</b>	<b># of Files</b>	<b>% Compliance</b>	<b>No</b>	<b>NA</b>
Criminal History Check Every 2 Years	33	<b>100%</b>	0	12
If the employee operates a state / county / personal vehicle, were annual MVD reviews conducted	36	<b>100%</b>	0	9

**Required Corrective Action:** None required.

<b>Continuing Education</b>				
<b>Requirement</b>	<b># of Files</b>	<b>% Compliant</b>	<b>No</b>	<b>NA</b>
2016 Annual Continuing Education Requirement	9	<b>100%</b>	0	0

**Required Corrective Action:** None required.

## Firearms Standards

Pursuant to [ACJA § 6-113](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Of the 45 officer files reviewed, 32 of them are armed officers and below are the findings:

<b>Firearms Standards</b>	<b>Yes</b>	<b>No</b>	<b>Total</b>	<b>% Compliance</b>	<b>NA</b>
<b>ACJA § 6-113(E)(1);</b> Officer written request to carry to CPO	32	0	32	<b>100%</b>	13
<b>ACJA § 6-113(E)(4);</b> CPO acts on officer initial request to carry within 30 days	32	0	32	<b>100%</b>	13
<b>ACJA § 6-113(E)(g)(1-7);</b> Officer signs form attesting to 7 Items	32	0	32	<b>100%</b>	13

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<b>Firearms Standards</b>	<b>Yes</b>	<b>No</b>	<b>Total</b>	<b>% Compliance</b>	<b>NA</b>
<b>ACJA § 6-113(E)(2)(a);</b> Officer completed psychological testing	32	0	32	<b>100%</b>	13
<b>ACJA § 6-113(E)(2)(b);</b> Criminal history records check completed	32	0	32	<b>100%</b>	13
<b>ACJA § 6-113(E)(2)(c);</b> Officer completed 8 hours defensive tactics training	27	0	27	<b>100%</b>	18
<b>ACJA § 6-113(E)(2)(d);</b> Officer signed form indicating medically/physically able to perform armed officer duties	32	0	32	<b>100%</b>	13
<b>ACJA § 6-113(E)(2)(e);</b> Officer completed Firearms Training Academy	32	0	32	<b>100%</b>	13
<b>ACJA § 6-113(E)(2)(f);</b> Officer completed competency test & training course on ACJA 6-112 & 113	32	0	32	<b>100%</b>	13
<b>ACJA § 6-113(G)(3);</b> CPO approves/disapproves request to carry within 30 days after officer completes all requirements	32	0	32	<b>100%</b>	13
<b>ACJA § 6-113(H)(1);</b> Officer signed form indicating officer understands terms & conditions in code and any department policy regarding use of firearms	32	0	32	<b>100%</b>	13
<b>ACJA § 6-113(G)(4)(5);</b> For denial, temporary suspension or revocation to carry, CPO must provide written reasons, place in personnel file & copy officer & officer's supervisor	0	0	0	<b>NA</b>	45
<b>ACJA § 6-113(H)(3);</b> Completed annual re-qualification & participated in all required practices sessions	32	0	32	<b>100%</b>	13

**Required Corrective Action:** None required.

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Pursuant to [ACJA § 1-302\(K\)\(6\)](#)

The CPO attended the American Probation and Parole Association's 40th Annual Training Institute on July 13, 2015.

**Required Corrective Action:** None required.

## **Minimum Accounting Standards (MAS)**

Pursuant to [ACJA § 1-401\(E\)\(1\)](#), [ACJA § 1-401\(E\)\(4\)](#), [ACJA § 1-401\(F\)\(2\)](#), [ACJA § 1-401\(F\)\(10\)](#), [ACJA § 1-401\(F\)\(12\)](#)

### **Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The operational review team obtained a copy of the department's most recent (Reporting Year: 2016) MAS Compliance Checklist which was completed by the department and received by the AOC on time. According to AOC, Court Services Division, Pima County Adult Probation is exempt from completing a Triennial External Audit as records indicate all monies for Pima County Adult Probation are collected by the Clerk of Court with any necessary disbursements being processed by Pima County Finance.

The department's employees do not collect money from probationers. All probationer payments for fines/fees/restitution are collected by a Clerk of the Court employee who has a space at the probation department's south office.

The signage was present in the south probation offices, the only office where monies are accepted. Electronic receipts are generated through the "Agave Criminal Financials" system when a payment is received by the Clerk of the Court Employee and the payment is processed through the Clerk of the Court financial system.

All money orders, cash and checks are kept in a locked bag, in an immovable locked vault, only accessible to authorized personnel until deposited. Money orders and checks are deposited daily by authorized Clerk of Court personnel. The Clerk of the Court Finance Unit is responsible for making bank deposits and there are only five Clerk of the Court authorized signatories on the IPS account.

**Required Corrective Action:** None required.

## **Financial and Statistical Reports**

Pursuant to [ACJA § 6-201.01 \(F\)\(12-13\)](#), [ACJA § 6-201.01 \(F\)\(16-17\)](#), [ACJA § 6-202.01 \(F\)\(10-11\)](#),

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and [ACJA §6-202.01 \(F\)\(14-15\)](#)

**Findings:**

- ☐ Exceeds Standard, substantially exceeds requirement of standard.
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard, requires corrective action: improvement is needed in the areas noted below
- ☐ Standard Not Applicable.

According to the AOC APSD budget specialist, mid-year and closing reports were received from the department on time and are accurate. Monthly budget reports are also received in proper format within specified time frames.

Code Standard for Financial	Compliance	
Closing financial and program activity report through December 31, 2016 submitted to AOC by January 31, 2017.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Closing financial and program activity report through June 30, 2016 submitted to AOC by August 31, 2016.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

According to AOC Data Specialist, annual hand count reports and performance measures were submitted on time.

Code Standard for Statistical Reports	Compliance	
Probation Departments operating an IPS program shall maintain and provide to the AOC data and statistics as may be required.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Probation Departments providing standard probation services shall maintain and provide to the AOC data and statistics as may be required.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
On request, Chief Probation Officer shall conduct hand counts of the department's IPS population and shall submit results of the hand counts.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
On request, Chief Probation Officer shall conduct hand counts of the department's standard probation population and shall submit results of the hand counts.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

**Required Corrective Action:** None required.

### **Pre-sentence Report (PSR)**

Pursuant to [Arizona Rules of Court 26.4\(B\)](#)

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**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

For the fiscal year 2016 (July 1, 2015 to June 2016), the department reported approximately 4,389 PSRs were prepared which contrasts with the APETS total of 4,374. The department indicated in the Self-Assessment Questionnaire (SAQ) that 99 percent of the 4,389 reports were submitted to the judge within two-business days of sentencing.

**Required Corrective Action:** None required.

**Recommendation:** The Department can utilize APETS reports to ensure that PSRs are submitted to the judge within two-business days prior to sentencing, which will result in 100 percent compliance.

## **Fleet Management**

Pursuant to [ACJA § 6-111](#), [A.R.S. § 38-538.02](#), and the Arizona Department of Administration Fleet Management Rule R2-15-202.

**Findings:**

- ☐ Exceeds Standard, substantially exceeds requirement of standard.
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard, requires corrective action: improvement is needed in the areas noted below
- ☐ Standard Not Applicable.

According to the AOC APSD Fleet Specialist, the department is in compliance with fleet management requirements. The department consistently submits their reports on time.

Code Standard for State Fleet	Compliance	
Department maintains a vehicle database or log that shall include, but not limited to; name of operators and location of vehicle.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Department submits monthly vehicle mileage reports.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Department conducts annual Motor Vehicle Department (MVD) reviews of all department employees operating a state vehicle.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Chief Probation Officer shall delegate management of the departments' state vehicles to an employee of the department.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

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Code Standard for State Fleet	Compliance
State vehicle damage or loss is reported to the AOC and ADOA Fleet Management within the next business day.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

**Required Corrective Action:** None required.

## COMMUNITY PROTECTION

The probation department has a responsibility to enhance public safety through careful supervision and monitoring of individuals receiving a suspended sentence. The review team assessed the department's compliance with these criteria in the following areas:

- Minimum contact standards for standard supervision cases
- Minimum contact standards for intensive supervision cases
- Minimum contact standards for sex offender cases
- Management of absconder cases
- Victim notification requirements

AOC policy requires officers to enter probationer contacts/case notes into the APETS within 72 hours. During February 1, 2017 through March 30, 2017 there were 80,395 contacts (91 percent) 72,526 contacts were entered on time.

### Standard Probation Supervision (SPS) Contacts

Pursuant to [ACJA § 6-201.01\(K\)\(8\)\(a\)](#), [ACJA § 6-201.01\(K\)\(6\)](#), [ACJA § 6-201.01\(K\)\(4\)\(a, b\)](#)

#### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

One hundred standard probation cases were reviewed. The average compliance rate for SPS contacts is 96 percent. The number of cases in each supervision level during the three-month review period (February 2017 through April 2017) is below:

Supervision Level	February 2017	March 2017	April 2017
Minimum	18	18	18
Medium	69	71	74
Maximum	9	9	8
<b>Total<sup>1</sup></b>	<b>96</b>	<b>98</b>	<b>100</b>

<sup>1</sup>Review of contact for some case files was not applicable because probationers' start dates were the following month and/or probationer was on IPS/Jail/DOC for that review period.



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Credit was not given for a collateral contact if the Contacts/Case Notes screen in APETS did not contain meaningful dialogue with the person.

<b>Required SPS Minimum Level Supervision Contacts</b>			
<b>Requirement Met</b>	<b>February 2017</b>	<b>March 2017</b>	<b>April 2017</b>
<b>Yes</b>	17	17	17
<b>No</b>	0	0	0
<b>Total</b>	17	17	17
<b>% Compliance</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

<b>Required SPS Medium Level Supervision Contacts</b>			
<b>Requirement Met</b>	<b>February 2017</b>	<b>March 2017</b>	<b>April 2017</b>
<b>Yes</b>	65	68	70
<b>No</b>	3	3	4
<b>Total</b>	68	71	74
<b>% Compliance</b>	<b>96%</b>	<b>96%</b>	<b>95%</b>

<b>Required SPS Maximum Level Supervision Contacts</b>			
<b>Requirement Met</b>	<b>February 2017</b>	<b>March 2017</b>	<b>April 2017</b>
<b>Yes</b>	8	8	7
<b>No</b>	1	1	0
<b>Total</b>	9	9	7
<b>% Compliance</b>	<b>89%</b>	<b>89%</b>	<b>100%</b>

<b>Required SPS Contacts Special Learning Needs Caseload Maximum Level~2 Face to Face Per Month<sup>1</sup></b>			
<b>Requirement Met</b>	<b>February 2017</b>	<b>March 2017</b>	<b>April 2017</b>
<b>Yes</b>	1	1	1
<b>No</b>	0	0	0
<b>Total</b>	1	1	1
<b>% Compliance</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

<sup>1</sup>Per Pima County SLN policy, SLN contacts are based on need and issue driven

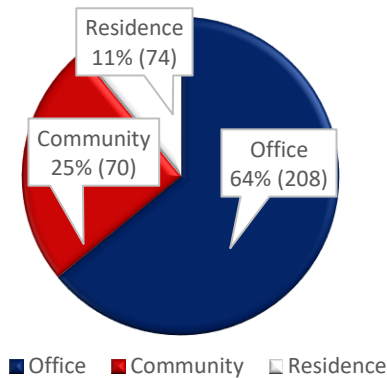
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**Required SPS Contacts Special Learning Needs Caseload  
Medium Level~1 Face to Face per Quarter<sup>1</sup>**

<b>Requirement Met</b>	<b>February 2017</b>	<b>March 2017</b>	<b>April 2017</b>
Yes	9	9	9
No	0	0	0
<b>Total</b>	<b>9</b>	<b>9</b>	<b>9</b>
<b>% Compliance</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

<sup>1</sup>Per Pima County SLN policy, SLN contacts are based on need and issue driven

**Location of SPS Probationer Contact  
Total Contacts: 352**



**Required Corrective Action:** None required.

**Recommendation:** Although minimum residential contacts are not prescribed in the ACJA, the department should consider setting minimum expectations for residential and community probation contacts.

### **Intensive Probation Supervision (IPS) Contacts**

Pursuant to [ACJA § 6-202.01 \(N\) \(3\)\(a\), \(4\)\(a\), \(5\)\(a\), \(6\)\(a\)](#)

**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

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The department has two, two-person IPS teams. For offender and employer contact compliance review, 70 intensive probation cases were reviewed for contact/case note compliance.

A review of the Contacts/Case Notes screen in APETS revealed the overall average for achieving IPS statutory weekly contact requirements was 96 percent during a 12-week period from **February 5, 2017 to April 29, 2017**. In accordance with ACJA 6-202.01 (N), the following represents IPS Probationer Contacts for a two-person IPS team during the review period.

**IPS Contact Summary – Two Person IPS Team**

Requirement Met	Week											
	1	2	3	4	5	6	7	8	9	10	11	12
Yes	58	60	59	60	60	62	60	59	67	69	66	66
No	1	0	1	1	2	2	5	6	1	1	4	4
N/A <sup>1</sup>	11	10	10	9	8	6	5	5	2	0	0	0
Total	70	70	70	70	70	70	70	70	70	70	70	70
<b>% Compliance</b>	<b>98%</b>	<b>100%</b>	<b>98%</b>	<b>98%</b>	<b>97%</b>	<b>97%</b>	<b>92%</b>	<b>91%</b>	<b>99%</b>	<b>99%</b>	<b>94%</b>	<b>94%</b>
<b>Average % Compliance</b>	<b>96%</b>											

<sup>1</sup>NA refers to intensive probationers in jail, DOC, residential treatment, or recently transitioned to standard supervision.

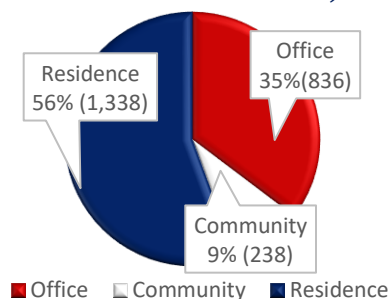
In accordance with ACJA 6-202.01 the following represents IPS Probationer with Employer Contacts for the two-person IPS team during the review period:

**IPS Contact with Employers – Two Person IPS Team**

Requirement Met	Week											
	1	2	3	4	5	6	7	8	9	10	11	12
Yes	24	25	27	26	24	25	27	29	28	27	27	27
No	1	0	0	1	2	2	2	1	2	3	2	4
N/A <sup>1</sup>	6	6	4	4	5	4	2	1	1	1	2	0
Total	31	31	31	31	31	31	31	31	31	31	31	31
<b>% Compliance</b>	<b>96%</b>	<b>100%</b>	<b>100%</b>	<b>96%</b>	<b>92%</b>	<b>93%</b>	<b>93%</b>	<b>97%</b>	<b>93%</b>	<b>90%</b>	<b>93%</b>	<b>87%</b>
<b>Average % Compliance</b>	<b>94%</b>											

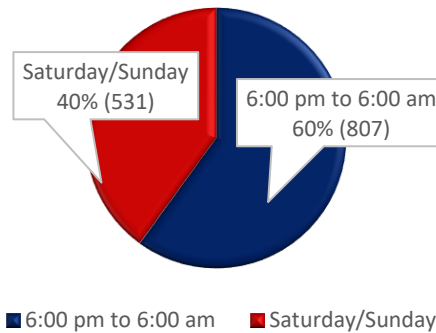
<sup>1</sup>NA refers to intensive probationers in jail, DOC, residential treatment, or recently transitioned to standard supervision.

**Location of Probationer IPS Contact  
Total Contacts: 2,412**



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**Varied Face to Face IPS Contacts  
Total Contacts: 1,338**



**Required Corrective Action:** None required.

**Recommendation:** Although minimum residential contacts are not prescribed in the ACJA, the department should consider setting minimum expectations for residential and community probation contacts.

### Sex Offender Contacts

Pursuant to [ACJA § 6-201.01\(K\)\(8\)\(a\)](#), [ACJA § 6-201.01\(K\)\(6\)](#) and [ACJA § 6-201.01\(K\)\(4\)\(a, b\)](#)

#### Findings:

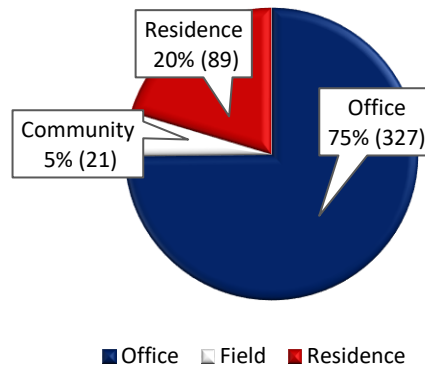
- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

One hundred sex offender (all SPS) cases were reviewed during the three-month review period (February 2017 through April 2017). Five of the cases reviewed were on maximum, 52 of the cases were on medium and 43 of the cases were on minimum supervision:

Required Supervision Contacts for Sex Offender Cases			
Requirement Met	February 2017	March 2017	April 2017
Yes	97	96	98
No	3	4	1
NA	0	0	1
Total	100	100	99
% Compliance	97%	96%	99%

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**Location of Sex Offender Contact  
Total Contacts : 656**



**Required Corrective Action:** None required.

**Recommendation:** Although minimum residential contacts for sex offenders are not prescribed in the ACJA, the department should consider setting minimum expectations for residential and community probation contacts.

It is important to note that officers rate of compliance was 95 percent or above due to making more than the statutorily required contact with probationers. Additionally, the collateral contacts made by officers with treatment providers are meaningful and informative.

## Absconders/Warrants

Pursuant to [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(1\)](#), [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(3\)](#), [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(4\)](#), [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(6\)](#), [A.R.S. § 13-805\(C\)\(1\)\(2\)](#), [A.R.S. § 13-105\(1\)](#), [ACJA § 6-105.01 \(E\)\(2\)\(g\)\(5\)](#) and [ACJA § 6-201.01\(J\)\(10\)\(a through g\)](#).

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Documentation in APETS and case files was reviewed for 78 absconder cases (17 IPS and 61 SPS). At the time of the review the sample of cases to be reviewed was generated, the cases were identified as absconders/warrants. Subsequently, some of the probationers may have been apprehended, nevertheless at

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the time of the on-site review the case was reviewed as an absconder/warrant case. The review findings are listed in the tables below:

<b>Activity to Locate <u>Before</u> Warrant Issued</b>	<b>Yes</b>	<b>No</b>	<b>% Compliance</b>	<b>N/A</b>	<b>Total Cases</b>
IPS Warrant Requested within 72 Hours	0	17	<b>0%</b>	61	78
SPS Warrant Requested within 90 days	43	18	<b>71%</b>	17	78
Residence Checked	58	9	<b>87%</b>	11	78
Collaterals Checked	53	18	<b>75%</b>	7	78
Employment Checked	7	12	<b>37%</b>	59	78
Certified Letter Sent	23	50	<b>32%</b>	5	78
<b>Activity to Locate <u>After</u> Warrant Issued</b>	<b>Yes</b>	<b>No</b>	<b>% Compliance</b>	<b>N/A</b>	<b>Total Cases</b>
After warrant issued, a criminal history check done	15	29	<b>34%</b>	34	78
Residence Checked	2	43	<b>4%</b>	33	78
Employment Checked	0	19	<b>0%</b>	59	78
Opted-In Victim Notified	15	3	<b>83%</b>	60	78
Annual Records Check	2	8	<b>20%</b>	68	78

<b>Requirement Met</b>	<b>If Warrant After 7/20/2011, CRO Filed Within 90 Days</b>	<b>Whereabouts Determined</b>
<b>Yes</b>	39	33
<b>No</b>	33	45
<b>N/A</b>	6	0
<b>Total</b>	72	78
<b>% Compliance</b>	<b>54%</b>	<b>NA</b>

**Department Response:**

**“IPS Warrant Requested Within 72 Hours:**

Department’s Response: Both the IPS Code and department policy require the filing of a Petition to Revoke probation within 72 hours of a determination that a probationer has absconded. This allows a brief opportunity to bring the probationer into compliance. The date one absconds may, and usually does, differ from the date of the last fact-to-face contact. Thus, this 0% finding may have resulted from how we define when the 72-hour time-frame begins to run. When a warrant is issued, we toll the running of probation from the date of the last face-to-face contact, but that may not be the same date that the probationer absconded. We simply know it was on or after that date. In the future, officers will be directed to note in the APETS case notes, the date they determine the probationer absconded so it is clear when the 72-hours begin. They will then prepare their petition, and management will audit for compliance when approving petitions.

**SPS Warrant Requested Within 90 Days:**

Department’s Response: The department will direct officers to either file a Petition to Revoke immediately when someone has been determined to have absconded or continue searching for them; and if they are searching, as supervisors urge officers to do, they must be cognizant of the date of the last face-to-face contact to file a petition on time. Closer supervisory oversight will help ensure timely filings of Petitions to Revoke. Again, officers will be directed to document in the case notes, the date the probationer is believed to have absconded so it is clear when the 90-day time frame begins.

**Residence Check:**

Department’s Response: Code requires a residence check every 30 days; however, that is impractical after an officer has determined someone moved without notice, i.e., the landlord states the tenant left

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two weeks prior and left no forwarding address. An officer will not return to that address but may elect to continue to search and wait 90 days since last face-to-face to file a Petition to Revoke depending on circumstances. While there is no value in checking the same vacated residence repeatedly, we can check other possible residences used by the probationer in the past, including the residences of family and associates. Supervisors will be directed to instruct their officers accordingly.

The department developed a case review absconder report, an example of which is attached, that has a checklist of tasks to complete, including residence checks, employment checks, and collateral checks, when a probationer has absconded. Supervisory review will ensure the checklist is completed prior to petition preparation.

**Collateral Checks:**

Department's Response: Officers will be directed to utilize collateral contacts such as family members as much as possible during their search for an absconder. Policy currently requires such efforts. Supervisors will be directed to monitor for compliance when staffing cases and approving Petitions to Revoke probation.

The department developed a case review absconder report, an example of which is attached, that has a checklist of tasks to complete, including residence checks, employment checks, and collateral checks, when a probationer has absconded. Supervisory review will ensure the checklist is completed prior to petition preparation.

**Employment Check:**

Department's Response: Again, Code requires an employment check every 30 days after absconding; however, as was the case with residence checks, once an officer has determined the probationer is no longer employed, the officer will discontinue the contacts and pursue other means to attempt to locate, including other former employers.

The department developed a case review absconder report, an example of which is attached, that has a checklist of tasks to complete, including residence checks, employment checks, and collateral checks, when a probationer has absconded. Supervisory review will ensure the checklist is completed prior to petition preparation.

**Certified Letter Sent:**

Department's Response: Code no longer requires that a certified letter be sent; therefore, unless otherwise indicated, the practice has been discontinued.

**After Warrant Issued**

**Criminal History Check:**

Department's Response: A checklist for post-warrant cases is being developed to ensure compliance. Support staff located at the U. S. Marshals Service where the department's warrants team is located will verify a residence check, employment check, and annual records checks are completed after receiving newly transferred cases from field officers. A documented entry into APETS will then be subject to supervisory review.

**Residence Check:**

Department's Response: A checklist for post-warrant cases is being developed to ensure compliance. Support staff located at the U. S. Marshals Service where the department's warrants team is located will verify a residence check, employment check, and annual records checks are completed after receiving newly transferred cases from field officers. A documented entry into APETS will then be subject to supervisory review.

**Employment Check:**

Department's Response: A checklist for post-warrant cases is being developed to ensure compliance. Support staff located at the U. S. Marshals Service where the department's warrants team is located will verify a residence check, employment check, and annual records checks are completed after receiving newly transferred cases from field officers. A documented entry into APETS will then be subject to supervisory review.

**Opted-in Victim Notified:**

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Department's Response: Opt-in victim notification is performed by support staff at each satellite office when a Petition to Revoke is prepared before transferring the file to the warrants team (not a function of support staff of the warrants team). Additional training and supervisory oversight will enhance and ensure compliance.

**Annual Records Check:**

Department's Response: A checklist, a copy of which is attached, has been developed to ensure compliance. Support staff located at the U. S. Marshals Service where the department's warrants team is located will verify a residence check, employment check, and annual records checks are completed after receiving newly transferred cases from field officers. A documented entry into APETS will then be subject to supervisory review.

**If Warrant After 7/20/2011, CRO Filed Within 90 Days:**

Department's Response: The department developed a process that allows officers to prepare the CRO when a Petition to Revoke is prepared. The CRO is left in the file when the file is sent to the warrants team. Administrative staff files the CRO after 90 days has lapsed since the last face-to-face contact with the probationer. The process will be reviewed with the appropriate staff and monitored biannually to ensure compliance."

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory case file reviews can include specific tasks outlined on a checklist indicating all offender related tasks were completed. Once APETS data is entered for each probationer, the data can be used as a supervisory tool for quality assurance.

## **Sex Offenders**

Pursuant to [A.R.S. § 13-3821](#), [A.R.S. § 13-3822](#), [A.R.S. § 13-3821\(J\)](#), [A.R.S. § 13-610](#), and [A.R.S. § 13-3825](#)

Pursuant to Pima County Sex Offender Policy: The initial home visit must occur within 72 hours (SPS) and 24 hours (IPS) of sentencing (Cases sentenced after 2013).

The relevant code in effect during the review period, [ACJA § 6-201.01\(K\)](#), requires a varied residential contact for Standard Probation Supervision (SPS) frequency based on supervision level, but none are specifically directed at residence or employment verification upon placement on probation or release from custody. However, verifying probationer's residence and workplace within 30 days of beginning supervision/release (current best practice) will provide the officer with insight into a probationer's needs and overall situation.

### **Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable



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Two hundred-eleven sex offender case files were reviewed. Information in APETS, as well as documentation in case files, was used to determine compliance in the following areas. The requirement for sex offender registration was not applicable for 86 cases (either the probationer was not required to register or there was no proof in the file of sex offender registration).

The requirement to register a change of address was not applicable for 130 cases as those cases were not statutorily required to register or they did not change their place of residence.

Summary of Sex Offender Requirements	Yes	No	% Compliant	N/A	Total
Initial home visit must occur within 72 hours (SPS) and 24 hours (IPS) of sentencing. (Cases sentenced after 2013) <i>Pima County Policy</i>	101	64	61%	46	211
Registration within 10 days	95	30	76%	86	211
New residence verified w/in 30 days (SPS)/72 hours (IPS)	182	23	89%	6	211
Address/name change notification change within 72 hours	71	10	88%	130	211
Yearly identification	115	14	89%	82	211
Treatment Referral to a contracted provider	178	15	92%	18	211
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming	115	20	85%	76	211
If it is not the probationer's 1st felony offense did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	43	22	65%	146	211
DNA screen completed in APETS	80	59	99%	10	211
Annual Polygraph	80	59	58%	72	211

**Department Response:** “To address the deficiencies noted above that are below 90%, the supervisors shall review the initial case plan case review (enclosed) and the sex offender case review checklist (enclosed) to ensure compliance. Additionally, the supervisor will conduct training on the proper use of the checklist and conduct periodic audits to enhance quality assurance. The department’s sex offender manual (enclosed) has been updated to require an initial home contact within five business days for SPS and 72 hours for IPS. Finally, the sex offender manual has been updated to require a periodic polygraph at the discretion of the officer, but at least every three years.”

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory case file reviews can include specific tasks outlined on a checklist indicating all offender related tasks were completed. Once APETS data is entered for each probationer, the data can be used as a supervisory tool for quality assurance.

## Aggravated DUI Caseload (AGG DUI)

Pursuant to [ACJA § 6-201.01](#) and [A.R.S. §13-610\(C\), \(D\)](#) and [\(G through O\)](#)

Some of the findings below are required pursuant to Pima County Adult Probation Department DUI Caseload Policy Manual Appendix 7.

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**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Thirty of the case files reviewed revealed the following:

Summary of Aggravated DUI Requirements	Yes	No	% Compliant	N/A	Total
OST within <b>30 days</b>	30	0	<b>100%</b>	0	30
OST/FROST Score Agree w/Supervision Level	27	3	<b>90%</b>	0	30
Score 11 or Above on OST for DUI Program (DUI Policy)	20	10	<b>67%</b>	0	30
Documentation a DUI intake/screening completed by a Licensed Provider (DUI Policy)	26	3	<b>90%</b>	1	30
Documentation Probationer successfully completed Cognitive Skills & Relapse Prevention Agg DUI Treatment program (DUI Policy)	19	0	<b>100%</b>	11	30
Presentence Contact with Victims	9	2	<b>82%</b>	19	30
Opt-in Victim notified of any petitions to the Court	0	1	<b>0%</b>	29	30
Documentation Attendance at MADD/Victim Impact & 60hrs CR (DUI Policy)	14	0	<b>100%</b>	16	30
Prior to Completion Did PO develop Aftercare plan and document in case notes (DUI Policy)	2	2	<b>50%</b>	26	30
If Restitution Ordered, payments current	3	1	<b>75%</b>	26	30
If restitution in arrears, opted-in victim notified	0	0	<b>NA</b>	30	30
If restitution in arrears, court notified	1	0	<b>100%</b>	29	30
DNA sample secured/transmitted to DPS within <b>30 days</b>	20	4	<b>87%</b>	6	30
If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer verify DNA was in the DPS databank within <b>30 days</b>	6	0	<b>100%</b>	24	30
DNA screen completed in APETS	25	5	<b>83%</b>	0	30

**Department Response:**

**“Score of 11 or higher on OST (DUI Policy):**

Department’s Response: Referrals from the Court Services Division (PSRs) and from field officers do follow this policy; however, some plea agreements require the Aggravated DUI Program as a term of the plea without knowledge of or reference to the OST score. Additionally, judicial discretion can be a factor in superseding policy. No changes to the Aggravated DUI Manual are recommended in this

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regard. We have made progress with the County Attorney and the Bench regarding evidence-based sentencing.

**Presentence Contact with Victims:**

Department's Response: The Court Services Division (CSD) sends a victim information/ notification letter to every victim who provides an address; however, not all victims reply. CSD probation officers or the department's victim's services staff follow up with a telephone call to victims who provide a telephone number.

If a victim address and/or telephone number are not provided, CSD staff attempt to locate any available contact information. However, many times the victims' addresses or telephone numbers have changed and no further contact information is available or cannot be located. Every possible effort is made to contact all victims. CSD is working with the County Attorney's Victims' Services Unit to update and maintain most recent victim contact information.

**Opt-In Victim Notified of Petitions/Court Hearings:**

Department's Response: One victim who should have been notified was not. The department has protocols in place that require notification to opt-in victims. We have a Victim Rights' Manual and stress 100% compliance. Victims' rights will be addressed with unit supervisors and their staff.

**Did PO Develop Aftercare Program (DUI Policy):**

Department's Response: The Aggravated DUI Program Manual requires the officer to prepare an aftercare plan; however, aftercare is more appropriately addressed by a treatment provider. The manual is being updated to remove this requirement.

**If Restitution Ordered, Payment Current:**

Department's Response: A great deal of focus is placed on collections, with restitution given the highest priority. Policy provides for a five-point financial investigation for those in arrears to determine ability to pay. In addition, we have access to Restitution Court in the event of any willful failure to pay. Within a few months, the department will initiate an automatic text reminder to probationers regarding court-ordered assessments. Supervisors are being asked to continue to focus on collections and to work with officers who need improvement in this area.

**DNA Sample secured and transmitted to DPS within 30 days:**

Department's Response: DNA collection and verification are monitored in several ways. At the initial probation contact after sentencing, the Department of Public Safety's (DPS) DNA database is checked for the collection of a DNA sample. If a sample is on file, the DNA screen in APETS is completed. If no sample is on file, CSD staff collects a sample and submits it to the DPS.

Sometimes probationers do not report to the probation office immediately after sentencing. When this occurs, a sample is immediately collected when the probationer reports to their field probation office. When the Initial Case Plan (ICP) is completed, a Case Review Report is printed which indicates the status of the probationer's DNA (collected/verified). The report is reviewed by a supervisor for compliance. Collection of a DNA sample within 30 days of sentencing is a priority in the department.

**DNA Screen Completed in APETS:**

Department's Response: The department has undertaken a project to update all DNA screens in APETS. A step-by-step process is being developed to ensure that required DNA samples are collected and submitted to DPS within 30 days of sentencing or release from custody and the DNA screen is reviewed and updated."

**Required Action:** None required.

**Recommendation:** Regular supervisory case file reviews can include specific tasks outlined on a checklist indicating all offender related tasks were completed. Once APETS data is entered for each probationer, the data can be used as a supervisory tool for quality assurance.

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## Compliance Monitoring Caseload (CMC)

Pursuant to [ACJA § 6-201.01](#), [A.R.S. §13-610\(C\), \(D\)](#) and [\(G through O\)](#)

Some of the findings below are required pursuant to Pima County Adult Probation Department Compliance Monitoring Caseload Policy Chapter Eight.

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Thirty-two of the case files reviewed revealed the following:

Summary of CMC Requirements	Yes	No	% Compliant	N/A	Total
90 days of negative drug tests prior to transfer to CMC (CMC Policy)	2	3	<b>40%</b>	27	32
Initial intake within 7 days (CMC Policy)	28	4	<b>88%</b>	0	32
OST within <b>30 days</b>	32	0	<b>100%</b>	0	32
OST/FROST score agree w/supervision level	31	1	<b>97%</b>	0	32
Was OST/FROST score 0-1? If yes, ok for CMC (CMC Policy)	0	32	<b>0%</b>	0	32
If minimum supervision level, was a case plan needed	15	17	<b>47%</b>	0	32
If yes, was a case plan completed?	14	1	<b>93%</b>	17	32
If restitution ordered, are payments current	5	9	<b>36%</b>	18	32
If restitution arrearage, were they referred to Restitution Court (CMC Policy)	8	1	<b>89%</b>	23	32
Documentation of records check <b>two times a year</b> (CMC Policy)	27	2	<b>93%</b>	3	32
Documentation of new arrests and subsequent release from custody, case shall be immediately assigned to SPS (CMC Policy)	0	0	<b>NA</b>	32	32
DNA sample secured/transmitted to DPS within <b>30 days</b>	27	2	<b>93%</b>	3	32
If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer verify DNA was in the DPS databank within <b>30 days</b>	0	0	<b>NA</b>	32	32
DNA screen completed in APETS	29	1	<b>97%</b>	2	32

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**Department Response:**

**“90 Days of Negative Drug Tests Prior To Transfer to CMC (CMC Policy):**

Department’s Response: As stated in the CMC policy, the requirement for 90 days of negative drug testing only applies to probationers with a drug history that are being referred by a field officer, once the probationer moves from medium risk to low risk on the FROST. Many referrals are directly from the Court Services Division where the defendant, at sentencing, is determined to be low risk. In such cases, there is no requirement for 90 days of negative testing. The unit supervisor screens all cases referred to the CMC caseload for suitability and eligibility.

**Initial Intake within 7 Days (CMC Policy):**

Department’s Response: While the CMC officer was generally able to meet this goal, circumstances exist to make full compliance impractical. Those include staff vacations/illnesses, position vacancies, staff training, and offender non-compliance. The CMC policy is being modified to require intake within 30 days of placement on the CMC caseload.

**OST/FROST was 0-1:**

Department’s Response: A previous version of the CMC policy allowed for placement on the CMC caseload directly from sentencing if the MOST (not the OST or FROST) was 0 or 1 in plea-sentenced defendants without benefit of a presentence report. We found that so few plea-sentenced defendants, usually convicted of drug crimes, scored 0 or 1 that we abandoned the use of the MOST. The policy was changed in June 2017. By that time, the AOC review team already had the outdated version of the CMC policy. The revised policy makes no reference to the MOST or the need to score 0 or 1. The only requirement is a low risk score on the OST or Frost.

**If Minimum Supervision Level, was a Case Plan Completed: 47%**

Department’s Response: Case plans are only completed on referrals from field officers where the probationer moved from a medium to a minimum level of supervision. Our policy is consistent with Code; a case plan is not required for low risk cases and all probationers on the CMC caseload are low risk.”

**AOC Response:** The departments statement contained in their response “...a case plan is not required for low risk cases” is not consistent with code. However, the department’s CMC policy includes the following language and was implemented. Since the department’s CMC policy and the department’s implementation of the policy is consistent with code and trumps the inaccurate statement above, no further action is required:

“...As long as the assessment (OST/FROST) does not identify any criminogenic risk/needs, case plans are not required. Officers will document in the case notes that no interventions are required. However, if new and emerging criminogenic risks and needs arise that require intervention, a case plan is required even if the case is retained on the CMC. Cases transferred to standard probation from the CMC will have the case plan developed by the receiving officer.”

**“If Restitution ordered, are Payments Current:**

Department’s Response: Approximately 15% of the department’s probationers owe restitution. In those cases, the Clerk’s Office divides the amount owed by the number of months of supervision. For example, if a probationer on a three- year probation term owes \$3,600 in restitution, the payment plan is \$100 per month, regardless of ability to pay. Should the probationer pay \$50 one month, he or she is not current, but there is no restitution arrearage requiring court notification. A 36% level of full restitution compliance on the CMC caseload far exceeds that of standard probation supervision. Still, we seek greater compliance through ability-to-pay investigations, Restitution Court, and our text reminders, soon to roll out.

**If Restitution Arrearage, were they referred to Restitution Court:**

Department’s Response: Eight of nine cases that should have been referred to Restitution Court were in fact referred. The need to refer to Restitution Court is a subjective judgment by the probation officer. We can achieve a higher level of compliance by annual audits of CMC cases owing restitution.”

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**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory case file reviews can include specific tasks outlined on a checklist indicating all offender related tasks were completed. Once APETS data is entered for each probationer, the data can be used as a supervisory tool for quality assurance.

## Domestic Violence Caseload (DV)

Pursuant to [ACJA § 6-201.01](#), [A.R.S. §13-610\(C\), \(D\)](#) and [\(G through O\)](#)

Some of the findings below are required pursuant to Pima County Adult Probation Department Domestic Violence Caseload Policy Manual.

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%)) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Fifty-one of the case files reviewed revealed the following:

Summary of Domestic Violence Requirements	Yes	No	% Compliant	N/A	Total
DV Orientation within <b>30 days</b> (DV Policy)	33	18	<b>65%</b>	0	51
OST within <b>30 days</b>	18	32	<b>36%</b>	1	51
Referred to DV intervention w/in <b>60 days</b> (DV Policy)	39	12	<b>76%</b>	0	51
Presentence Contact with victim	18	33	<b>35%</b>	0	51
Documentation that victim letters and safety packet sent to victim (DV Policy)	43	5	<b>90%</b>	3	51
If applicable, Documentation of personal contact w/victim w/in <b>30 days</b> of sentencing (DV Policy)	9	35	<b>20%</b>	7	51
If applicable, personal victim contact <b>every 6 months</b> (DV Policy)	3	26	<b>10%</b>	22	51
If restitution ordered, payments current	0	0	<b>NA</b>	51	51
If restitution in arrears, was opted-in victim notified	0	0	<b>NA</b>	51	51
DNA sample secured/transmitted to DPS within <b>30 days</b>	9	3	<b>75%</b>	39	51
If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer verify DNA was in the DPS databank within <b>30 days</b>	0	2	<b>0%</b>	49	51



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<b>Summary of Domestic Violence Requirements</b>	<b>Yes</b>	<b>No</b>	<b>% Compliant</b>	<b>N/A</b>	<b>Total</b>
DNA screen completed in APETS	14	0	100%	37	51

**Department Response:**

**“DV Orientation within 30 days:**

Department’s Response: The attendance of Domestic Violence Orientation (DVO) currently is only for men who commit intimate partner violence. Non-intimate partner cases are not assigned to DVO. There is a community partnership that is working on a women’s DVO, but women are not required to attend DVO either. The policy manual should read that attendance for limited jurisdiction cases will be 30 days after the probationer reports to the department. A DV review form will be added to the Case Review form to ensure all DV specific items are addressed according to the DV Policy and Procedure manual.

**OST within 30 days:**

Department’s Response: This requirement is likely completed 100% for superior court cases but not for limited jurisdiction court cases. No PSR or presentence work is completed prior to sentencing on limited jurisdiction cases. The probationer shows up after being directed to by the limited jurisdiction court but the department does not receive notification that a defendant was placed on supervised probation for most of the limited jurisdiction cases. Officers complete an OST generally within 30 days of the probationer’s first contact with the department, then will complete the home contact and finalize a case plan within 60 days. This will be added to the DV review indicating when a probationer first made contact with the department.

**Referred to DV intervention within 60 days:**

Department’s Response: Officers should be directing probationers to DV intervention at the first face-to-face review and including it on the regulations. This will be added to the DV review.

**Presentence contact with victim:**

Department’s Response: It’s likely these 33 cases are limited jurisdiction court cases. The department has no presentence victim contact on these cases. A three-year grant has been awarded for a position to attempt to address this area. No limited jurisdiction courts share information with the department on their own attempts to make presentence victim contact.

**Documentation that victim letters and safety packet sent to victim and, if applicable, documentation of personal contact with victim within 30 days of sentencing:**

Department’s Response: This will be added to the DV case review supplemental. The additional grant position will attempt to garner valid victim information for officers to follow-up on.

**If applicable, personal victim contact every six months:**

Department’s Response: This will be an area of emphasis for completion and documentation. The additional position will attempt to garner valid victim contact information and officers will be required to adhere to this standard.

**DNA sample secured/transmitted to DPS within 30 days:**

Department’s Response: Officers are required to document limited jurisdiction cases that do not require DNA and to ensure DNA for felons is obtained pursuant to policy and procedures. This issue is a part of the case review and will be addressed as under-performing.

**If not the probationer’s first felony offense or if DNA was previously secured by another agency, did the officer verify DNA was in the DPS databank within 30 days: 0%**

Department’s Response: For the cases in which DNA is required, officers will adhere to the standard of verifying DNA is in the DPS databank within 30 days. If a limited jurisdiction court case has this requirement, the officer will not know until the full background investigation is received after the defendant makes contact after sentencing. The department is working with the two main limited jurisdiction courts on receiving appropriate notice. This requirement will be completed for limited jurisdiction court cases at least 30 days after initial contact with the department and documented.”

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**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory case file reviews can include specific tasks outlined on a checklist indicating all offender related tasks were completed. Once APETS data is entered for each probationer, the data can be used as a supervisory tool for quality assurance.

## Seriously Mentally Ill Caseload (SMI)

Pursuant to [ACJA § 6-201.01](#), [A.R.S. §13-610\(C\), \(D\) and \(G through O\)](#)

Some of the findings below are required pursuant to Pima County Adult Probation Department Seriously Mentally Ill Policy Manual.

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Fifty-six of the case files reviewed revealed the following:

Summary of SMI Requirements	Yes	No	% Compliant	N/A	Total
OST within <b>30 days</b>	51	5	<b>91%</b>	0	56
Signed Review & Acknowledgement of SMI Conditions (SMI Policy)	52	4	<b>93%</b>	0	56
ICP Plan with SMI requirements (SMI Policy)	4	52	<b>7%</b>	0	56
Documentation of requests for letters from treatment providers (SMI Policy)	40	16	<b>71%</b>	0	56
DNA sample secured/transmitted to DPS within <b>30 days</b>	31	9	<b>78%</b>	16	56
If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer verify DNA was in the DPS databank within <b>30 days</b>	7	9	<b>44%</b>	40	56
DNA screen completed in APETS	43	13	<b>77%</b>	0	56

### Department Response:

#### “Initial Case Plan with SMI Requirements (SMI Policy):

Department's Response: The department's SMI Manual is being updated to reflect current policy and practice regarding the preparation of ICPs as described in the Field Services Manual. When the probationer's risk and need have been determined, adding more information to complete the ICP is unnecessary.



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**Documentation of Requests for letters from Treatment Providers (SMI Policy):**

Department's Response: The SMI Manual requires this; however, officers attend Mental Health Court review hearings, Adult Recovery Team staffings, and are in regular contact with treatment providers, all of which render the letter moot. The SMI Manual is being updated to remove this requirement.

**DNA Sample Secured/Transmitted to DPS within 30 Days:**

Department's Response: DNA collection and verification are monitored in several ways. At the initial probation contact after sentencing, the DPS's DNA database is checked for a DNA sample on file. If a sample is on file, the DNA screen in APETS is completed. If not, CSD staff collects a sample and submits it to the DPS.

Sometimes probationers do not report to the probation office immediately after sentencing. When this occurs, a sample is immediately collected when the probationer reports to their field probation office.

**DNA Verification in the DPS Database within 30 Days:**

Department's Response: When the Initial Case Plan is completed, a Case Review Report, which reflects the probationer's DNA status (collected/verified), is printed and reviewed by a supervisor. Probation staff make all efforts to collect a DNA sample within 30 days of sentencing and review the DPS's database for verification; however, DPS frequently does not complete verification within 30 days.

**DNA Screen Completed in APETS:**

Department's Response: The department is currently in the process to update all DNA screens in APETS. A step-by-step process is being developed to ensure that required DNA samples are collected and submitted to DPS within 30 days of sentencing or release from custody and the DNA screen is reviewed and updated."

**Required Action:** None required.

**Recommendation:** Regular supervisory case file reviews can include specific tasks outlined on a checklist indicating all offender related tasks were completed. Once APETS data is entered for each probationer, the data can be used as a supervisory tool for quality assurance.

## **Global Positioning System (GPS)**

Pursuant to [A.R.S. § 13-902\(G\)](#) and [AD 2011-41](#).

**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

As of April 2017, the department reported on the Self-Assessment Questionnaire they have 66 probationers on GPS and use BI, Incorporated, for GPS services.

The table below lists the results of 31 GPS case files reviewed.

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Summary of GPS Requirements	Yes	No	% in Compliance	NA	Total
GPS attribute marked in APETS	31	0	100%	0	31
Probationer activated on initial report w/in 72 hours of sentencing/release from custody	30	0	100%	1	31
Probationer activated upon first face to face with probation officer after Court Ordered Modification	1	0	100%	30	31
GPS rules signed by probationer	30	1	97%	0	31
For documented violations, PO initiate immediate response	19	8	70%	4	31
Was response appropriate	18	0	100%	13	31
PO respond to alerts within 24 hours	5	0	100%	26	31
Responses entered into APETS within 72 hours	19	1	95%	11	31
If absconder, PTR with 72 hours	1	0	100%	30	31

**Department Response:** “The Regional Monitoring Analysts (RMAs) document violations, or what appear to be violations, in a case note entry in APETS. Additionally, they notify the supervising officer or designee of the apparent violation by e-mail, telephone and/or text message. There are occasions when the officer responds to the RMA and advises that, although the location/activity appeared to be an anomaly in the probationer’s pattern, it had been preapproved. In these instances, officers are not documenting responses to the alerts because they were not violations. In some situations, depending on the level of response required, the officer advises the RMA the violation will be addressed later in the week when the probationer is scheduled to report. The RMAs report the Pima County probation officers respond to them in a timely manner with a resolution. The supervisor will audit for full compliance.”

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory case file reviews can include specific tasks outlined on a checklist indicating all offender related tasks were completed. Once APETS data is entered for each probationer the data can be used as a supervisory tool for quality assurance.

## Signed Review/Acknowledgement of Terms and Conditions

Pursuant to [Arizona Rules of Criminal Procedure 27.1](#)

**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

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A signed Review and Acknowledgement form was contained in 136 of 235 applicable SPS files and 32 of 145 applicable IPS files.

Summary of Review and Acknowledgement forms				
Type of Probation	Yes	No	Total	% Compliance
SPS	136	99	235	58%
IPS	98	47	145	68%

**Department Response:** “The department has an existing form to be used for this specific purpose. Unit supervisors have been directed to provide mandatory training to all staff regarding the mandatory use of this form in every case. A copy of the form is enclosed.”

**Required Corrective Action:** None required.

**Recommendation:** A case checklist which lists requirements to be completed within the first seven to 30 days to completed at initial intake for officer’s utilization and monthly supervisory case file reviews will assist to ensure compliance.

## DNA Collection

Pursuant to [A.R.S. §13-610\(C\), \(D\) and \(G through O\)](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Two hundred thirty-five SPS files were reviewed and 145 IPS case files were reviewed.

## SPS DNA Collection

SPS DNA Collection/Verification within 30 days	
Yes	102
No	13
Total	115
NA <sup>1</sup>	120
% Compliance	89%

<sup>1</sup>misdemeanor dispositions, another agency/county responsible for DNA collection/verification or DNA would have been verified in an earlier operational review

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<b>SPS DNA Collection/Verification</b>	
<b>If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming</b>	
<b>Yes</b>	15
<b>No</b>	31
<b>Total</b>	46
<b>NA</b>	189
<b>% Compliance</b>	<b>33%</b>

## IPS DNA Collection

<b>IPS DNA Collection/Verification within 30 days</b>	
<b>Yes</b>	60
<b>No</b>	15
<b>Total</b>	75
<b>NA<sup>1</sup></b>	70
<b>% Compliance</b>	<b>80%</b>

<sup>1</sup>misdemeanor dispositions, another agency/county responsible for DNA collection/verification, DNA taken while probationer on SPS or DNA would have been verified in an earlier operational review

<b>IPS DNA Collection/Verification</b>	
<b>If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming</b>	
<b>Yes</b>	29
<b>No</b>	39
<b>Total</b>	68
<b>NA</b>	77
<b>% in Compliance</b>	<b>43%</b>

### Department Response:

#### “IPS DNA collection within 30 days:

Department's Response: DNA collection and verification are monitored in several ways. At the initial probation contact after sentencing, the Department of Public Safety's (DPS) DNA databank is checked for the collection of a DNA sample. If a sample is on file, the DNA screen in APETS is completed. If no sample is on file, staff from our Court Services Division secures a sample and submits it to the DPS. Sometimes probationers do not report to the probation office immediately after sentencing. When this occurs, a sample is immediately collected when the probationer reports to their field probation office. When the Initial Case Plan (ICP) is completed, a Case Review Report is printed which indicates the status of the probationer's DNA (collected/verified). The report is reviewed by a supervisor for compliance. Collection of a DNA sample within 30 days of sentencing is a priority for the department. A department-wide DNA full compliance initiative is now in progress.

**If not the probationer's first felony offense or if DNA was previously secured by another agency, did the officer verify DNA was in the DPS databank within 30 days:**

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Department's Response: The department has undertaken a project to update all DNA screens in APETS. A step-by-step process is being developed to ensure that required DNA samples are collected and submitted to DPS within 30 days of sentencing or release from custody and the DNA screen is reviewed and updated."

**Required Corrective Action:** None required.

It should be noted that after the operational review, the department was notified of probation files that were missing documentation of DNA. The department has since either collected DNA and/or verified DNA for each of those cases.

**Recommendation:** Refresher training and regular supervisory case file reviews will assist and remind officers that DNA must be collected and transmitted or verified within 30 days of the probation start date/acceptance of incoming as required by statute.

## VICTIMS' RIGHTS

### SPS Victim Contacts

Pursuant to [A.R.S. §13-4415 \(A\)\(1-3\)](#), [A.R.S. §13-4415 \(B\)\(1-5\)](#), and [ACJA § 6-103\(E\)\(4\)](#)

#### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Two hundred thirty-five case files were reviewed. Per APETS data and case file information, 78 of the 114 applicable cases had an opted-in victim(s). Moreover, 25 of the cases had situations that opted-in victims would have been given notice of changes.

SPS - Victim Contact			
Requirement Met	Pre-sentence Contact	Victim Opt-In	Notice of Changes Given
Yes	108	78	21
No	14	36	4
Total	122	114	25
NA	113	121	210
% Compliance	89%	NA	84%

**Department Response:** "The quality assurance process for victim contacts is detailed in our CSD manual and our victim rights manual, both of which were provided previously.

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**Presentence Contact with Victims:**

Department's Response: The Court Services Division (CSD) sends a victim information/ notification letter to every victim who provides an address; however, not all victims reply. CSD probation officers or the department's victim's services staff follow up with a telephone call to victims who provide a telephone number.

If a victim address and/or telephone number are not provided, CSD staff attempt to locate any available contact information. However, many times the victims' addresses or telephone numbers have changed and no further contact information is available or cannot be located. Every possible effort is made to contact all victims. CSD is working with the County Attorney's Victims' Services Unit to update and maintain most recent victim contact information.

**Notice of Changes Given (Opt in Victim Notified of Petitions/Court Hearings):**

Department's Response: The department has protocols in place that require notification to opt-in victims. We have a Victim Rights' Manual and stress 100% compliance. Victims' rights will be addressed with unit supervisors and their staff."

**Required Corrective Action:** None required.

**Recommendation:** Refresher training and regular supervisory case file reviews will assist to ensure compliance. Remind officers to update victim opted-in information into the applicable APETS screen, and/or case notes. APETS report can be run to help assist with quality assurance and case file reviews.

**IPS Victim Contacts**

One hundred forty-five IPS cases files were reviewed. Per APETS data and case file information, 22 of the 88 applicable cases had an opted-in victim(s).

Requirement Met	Pre-sentence Contact	Victim Opt-In	Notice of Changes Given
Yes	88	22	19
No	2	66	1
Total	90	88	20
NA	55	57	125
% Compliance	98%	NA	95%

**Required Corrective Action:** None required.

**Recommendation:** Refresher training and regular supervisory case file reviews will assist to ensure compliance. Remind officers to update victim opted-in information into the applicable APETS screen, and/or case notes. APETS report can be run to help assist with quality assurance and case file reviews.

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**OFFENDER ACCOUNTABILITY**

The enforcement of court-ordered financial obligations such as restitution and probation service fees (PSF) and community restitution orders (CRO) are integral parts of probation supervision, the absence of which undermines probationer accountability and mitigates the sentence imposed. During the operational review, intensive and standard probation case files were reviewed to assess the department's enforcement of financial obligations and CROs.

**SPS Financials**

Pursuant to [ACJA § 6-103\(E\)\(4\)\(I\)](#), [A.R.S. § 13-901](#)

**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

A summary of offenders' financial status is maintained in each case file. Two hundred thirty-five SPS case files were reviewed. Restitution was ordered in 23 of 235 standard cases reviewed and probation supervision fees were ordered in 131 of 235 case files reviewed. Information in the case file/financial file/APETS and information from the department revealed the following:

Standard Restitution			
Requirement Met	Restitution Current	Court Notified	Opted in Victim Notified
Yes	4	7	4
No	19 <sup>1</sup>	11 <sup>1</sup>	9 <sup>1</sup>
Total	23	18	13
% in Compliance	17%	39%	31%

<sup>1</sup>Court/victim notification of delinquent restitution not found in files/no documentation  
Contacts/Case Notes in APETS, Restitution is "delinquent" where payments are in arrears two or more months.

Standard Probation Service Fees (PSF)	
Requirement Met	PSF Current
Yes	40
No	91
Total	131
NA	104
% in Compliance	31%

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Probation Officers addressed all court financial delinquencies in 81 (86 percent) of 94 applicable cases.

**Department Response:**

“Restitution Current: A great deal of focus is placed on collections, with restitution given the highest priority. Policy provides for a five-point financial investigation for those in arrears to determine ability to pay. In addition, we have access to Restitution Court in the event of any willful failure to pay. Within a few months, the department will initiate an automatic text reminder to probationers regarding court-ordered assessments. Supervisors are being asked to continue to focus on collections and to work with officers who need improvement in this area.

Restitution Court Notified: Unit supervisors have been directed to provide mandatory training to all staff regarding the court notification of restitution arrearages, as noted in FSD Manual, Chapter 4. VI. A. 4, including proper documentation in APETS and/or in the case file.

Restitution Opt in Victim Notified: The department has protocols in place that require notification to opt-in victims. We have a Victim Rights’ Manual and stress 100% compliance. Victims’ rights will be addressed with unit supervisors and their staff.

Standard Probation Service Fees: A great deal of focus is placed on collections. Policy provides for a five-point financial investigation for those in arrears to determine ability to pay. Within a few months, the department will initiate an automatic text reminder to probationers regarding court-ordered assessments. Supervisors are being asked to continue to focus on collections and to work with officers who need improvement in this area. Guidelines and strategies to enhance collections are described in FSD Manual, Chapter 4. VI. A and B.

**Required Corrective Action:** None required.

**Recommendation:** Refresher training and regular supervisory case file reviews will assist to ensure timely notification to the Court and opted-in victims of probationer arrearages in restitution, as well as to increase efforts regarding enforcement of financial orders.

## **IPS Financials**

Pursuant to [ACJA § 6-103\(E\)\(4\)\(i\)](#), [A.R.S. § 13-901](#)

### **Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%))
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

A summary of offenders’ financial status is maintained in each case file. One hundred forty-five IPS case files were reviewed. Restitution was ordered in 26 of 145 IPS cases reviewed and probation supervision



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fees were ordered in 141 of the 145 IPS case files reviewed. Information in the case file/financial file/APETS and information from the department revealed the following:

<b>IPS Restitution</b>			
<b>Requirement Met</b>	<b>Restitution Current</b>	<b>Court Notified</b>	<b>Opted in Victim Notified</b>
<b>Yes</b>	13	9	5
<b>No</b>	13 <sup>1</sup>	3	1 <sup>1</sup>
<b>Total</b>	16	12	6
<b>% Compliance</b>	<b>50%</b>	<b>75%</b>	<b>83%</b>

<sup>1</sup>Court/victim notification of delinquent restitution not found in files/no documentation Contacts/Case Notes in APETS, Restitution is "delinquent" where payments are in arrears two or more months.

<b>Intensive Probation Service Fees (PSF)</b>	
<b>Requirement Met</b>	<b>PSF Current</b>
<b>Yes</b>	38
<b>No</b>	103
<b>Total</b>	141
<b>NA</b>	22
<b>% in Compliance</b>	<b>27%</b>

Probation Officers addressed financial delinquencies in 104 (85 percent compliance rate) of 123 applicable cases.

**Department Response:**

**"Restitution current: IPS probation service fees current:**

Department's Response: IPS Financials are monitored via self-report by offenders, the APETS Pima Web Reports and Superior Court's Clerk of the Court. Fees and restitution are submitted at either the Clerk's Office or the department's South office.

The IPS team will verify twice a month that payments toward fees and restitution have occurred (reviewing receipts). If probationer is not paid by check, which can be collected by the Clerk of the Court, the probationer will pay via debit/credit card during office contact at least twice monthly. The IPS team and probationer will sign regulations of amount and weeks of payment.

During unit meetings, a review of financials will be discussed as fees and restitution collections is a priority for the department.

**Court notified of arrearage:**

Department's Response: Chapter four of our Field Services Division Operations Manual requires court notification of any restitution arrearage, defined as two or more months in arrears. Supervisors have been directed to reinforce this policy at unit meetings and to conduct periodic audits for compliance. Internal formal audits will also focus on court notification of restitution arrearages.

**Opted-In victim notified of restitution arrearage:**

Department's Response: Policy requires victim notification of restitution arrearages. Supervisors have been directed to reinforce the policy at unit meetings and to conduct periodic audits. Our formal internal audits will also address victim notification."

**Required Corrective Action:** None required.

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**Recommendation:** Refresher training and regular supervisory case file reviews will assist to ensure timely notification to the Court and opted-in victims of probationer arrearages in restitution, as well as to increase efforts regarding enforcement of financial orders.

## IPS Collection of Probationer Wages

Pursuant to [A.R.S. § 13-918\(B\)](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The Chief Probation Officer established an IPS checking account in accordance with statute. IPS probationers submit their wages to the department. The department issues a receipt and, after payment is made, the remaining balance is returned to the probationer that afternoon or the following day. A summary of offenders' financial status is maintained in each case file.

Below are the findings for the 145 IPS files reviewed.

Paychecks/Wages Submitted by Probationers on IPS			
Wages Submitted for each month	February 2017	March 2017	April 2017
Yes	23	27	26
No	72	80	85
Total	95	107	111
NA <sup>1</sup>	50	38	34
% in Compliance	24%	25%	23%

<sup>1</sup>Wages not applicable for unemployed probationers, students, or disabled probationers

### Department Response:

#### “IPS collection of probationer’s wages:

Department’s Response: The Pima County Clerk of the Court manages the collection of probationer wages and assessment payments. Upon remitting wages (paychecks), the Clerk of the Court requires a three-day delay to ensure the paycheck has cleared the financial institution and monthly assessments are processed prior to remitting the balance to the probationer. When the Clerk of the Court experienced budget constraints, the clerk stations at the East and West field offices were removed, leaving only two locations where probationers could render their wages. This created a hardship for IPS probationers with limited transportation to not only report to their assigned officers weekly, but to also report to the Clerk of the Court an additional two times weekly to submit and obtain their wages. In addition, there has been an influx of businesses utilizing debit/credit card systems rather than paychecks for which there is no practical solution for probationers to submit their wages. Despite the noted constraints, a

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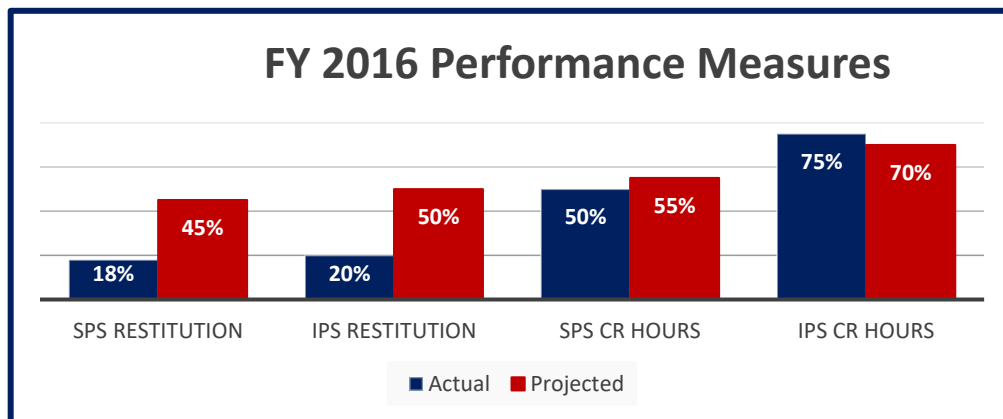
great deal of focus is placed on assessment collections, with restitution given the highest priority. Supervisors will continue to be the quality oversight to ensure assessment payments are addressed with IPS probationers, especially when level changes and case reviews are submitted.”

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory caseload reviews, unit meetings/trainings and checklist will help ensure IPS requirements are met.

### Performance Measures Comparison

The department reported on performance measures for restitution and community restitution (CR) hours achieved for FY 2016. The department did not meet performance measures expectations for IPS and SPS in restitution and SPS CR hours however exceeded IPS CR hour FY 2016 projections.



### SPS Community Restitution (CR) Hours

Pursuant to [ACJA § 6-201.01\(K\)\(5\)\(d\), \(7\)\(c\), and \(8\)\(d\)](#), and [ACJA § 6-201.01\(J\)\(1\)\(h\)](#)

#### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Two hundred thirty-five SPS case files were reviewed regarding CR hours for February, March and April 2017 and a monthly breakdown of CR hour compliance for the review period is illustrated below:

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**SPS Monthly Community Restitution Requirement Met**

Monthly CR Hours Completed	February 2017	March 2017	April 2017	Officer Addressed Delinquency
Yes	4	2	6	21
No	18	18	17	10
Total	22	20	23	31
NA <sup>1</sup>	213	215	212	204
<b>% Compliance</b>	<b>18%</b>	<b>10%</b>	<b>26%</b>	<b>68%</b>

<sup>1</sup>CR hours were: not ordered, discretionary, or completed prior to the review period.

**Department Response:** “Officers have been directed to review Community Restitution (CR) completion every six months during case reviews. The case review checklist shows the number of hours completed at the time of review to which officers will be directed to address. Additionally, officers will be reminded to enter all CR hours completed in the APETS CR screen to ensure all hours completed are recorded.

Early in 2017, the department modified its policy to allow CR credit for self-improvement activities such as school attendance to obtain a diploma or GED, and attendance in various treatment programs. To improve the department’s CR compliance, officers will be trained to understand and encourage the use of pro-social programs that meet the department’s CR criteria.”

**Required Corrective Action:** Please provide a copy of the department’s quality assurance process and administrative oversight to ensure continued compliance.

**Recommendation:** Regular supervisory caseload reviews, unit meetings/trainings and checklist will help ensure CR requirements are met. Remind officers to CR information into the applicable APETS screens and APETS reports can be run to help assist with quality assurance and case file reviews.

## IPS Community Restitution (CR) Hours

Pursuant to [A.R.S. § 13-914\(E\)\(6\)](#), [ACJA § 6-202.01\(I\)\(1\)](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

One hundred forty-five IPS cases were reviewed regarding CR hours for February, March and April 2017 and a monthly breakdown of CR hour compliance for the review period is listed below:

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<b>IPS Monthly Community Restitution Requirement Met</b>				
<b>Weekly CR Hours Completed</b>	<b>February 2017</b>	<b>March 2017</b>	<b>April 2017</b>	<b>Officer Addressed Delinquency</b>
<b>Yes</b>	51	63	64	76
<b>No</b>	62	58	68	21
<b>Total</b>	113	121	132	97
<b>NA<sup>1</sup></b>	32	24	13	48
<b>% Compliance</b>	<b>45%</b>	<b>52%</b>	<b>49%</b>	<b>78%</b>

<sup>1</sup>probationer was in prison, jail, treatment, hospital, severe drug issues, missing, or CR hours were waived

**Department Response:**

**“IPS monthly community restitution hours met:**

Department’s Response: Early in 2017, the department modified its policy to allow Community Restitution (CR) credit for self-improvement activities such as school attendance to obtain a diploma or GED, and attendance in various treatment programs. To improve the department’s CR compliance, officers will be trained to understand and encourage the use of pro-social programs that meet the department’s CR criteria.

**Officer addressed community restitution delinquency:**

Department’s Response: All Standard Probation Supervision (SPS) supervisors will be encouraged to address the issue of non-compliance during their unit meetings. In addition, supervisors will be encouraged to verify CR compliance with statute and code when an officer submits a file for a mandatory case review every six months.

Intensive Probation Supervision (IPS) officers will be encouraged to adhere to the revised code as defined by the AOC and by the department’s revised policy. IPS supervisors will be directed to verify CR compliance at the time of level changes and case reviews. This will ensure that officers are adhering to IPS code.

In both cases, the case review and level change checklist will show the supervisors the CR hours required and completed. Officers will be directed to address any arrears issues.

Community Restitution compliance is a vital part of each defendant’s sentence of probation. Officers will be trained and required to enter CR data into APETS correctly and in a timely manner in accordance with department policy.

Recent modifications to policy allow probationers to secure credit for CR through personal improvement activities, such as cognitive skills training or work on their GED. This should significantly minimize incidents of noncompliance in the future.”

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory caseload reviews, unit meetings/trainings and checklist will help ensure IPS requirements are met.

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**CASE MANAGEMENT**

**SPS**

**SPS Residence and Employment Verification**

The relevant code in effect during the review period, [ACJA § 6-201.01\(K\)](#), requires a varied residential contact frequency based on supervision level, but none are specifically directed at residence or employment verification upon placement on probation or release from custody. At the time of this Operational Review (*cases sentenced prior to January 11, 2017*), there is no statute, code, or departmental policy regarding SPS residence verification. However, best practice indicates this should be completed within 30 days of sentencing/release from custody as it will provide the officer with insight into a probationer's needs and overall situation.

**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☒ Standard Not Applicable/For information Purposes only

Not all probation officers use the Address/Employment History screens in APETS to document the date verified for address verification and employment verification. Therefore, the operational review team read through the contact notes for each case to determine compliance.

The following table shows the number of residence and employment verifications conducted for the 235 case files reviewed.

Standard Supervision – Residence & Employment Verification		
	Residence Verification within 30 Days (Initial and Changes)	Initial Employment Verification (within 30 days)
Yes	139	60
No	89	54
Total	228	114
NA	7	121
% completed	61%	53%

**Department Response:** “To address the deficiencies noted above, the supervisors shall review the initial case plan case review (enclosed) and conduct 180-day case reviews and train staff to ensure compliance. Officers have been reminded to enter verification information into the applicable APETS screens.”

**Required Corrective Action:** None required.

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**Recommendation:** Regular supervisory caseload reviews, unit meetings/trainings and a checklist will help ensure timely verification. Remind officers to enter verification information into the applicable APETS screens and APETS reports can be run to help assist with quality assurance and case file reviews.

### SPS OST/FROST Timeline Compliance

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(a\)\(1\)](#), [ACJA § 6-105.01\(E\)\(2\)\(b\)\(1\)\(c\)](#), and [ACJA § 6-105.01\(E\)\(2\)\(b\)\(1\)\(g\)](#)

#### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The results for the 235 SPS case files reviewed are listed in the table below.

#### SPS Offender Screening Tool (OST) Completed within 30 days

Yes	195
No	23
Total	218
NA	17
<b>% Compliance</b>	<b>89%</b>

Two hundred thirty-five files were reviewed, in which 1,192 FROST assessments were conducted. The results are listed in the table below:

#### FROST<sup>1</sup> Completed for Standard Supervision Cases (180 Days)

Yes	164
No	330
Total	494
NA	698
<b>% Compliance</b>	<b>33%</b>

<sup>1</sup>The FROSTs for the past three years were reviewed.

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**Department Response:** “Regularly scheduled unit quality assurance audits do audit for timeliness and completeness of the OST and FROST (QA instrument enclosed). Those audits will continue; in addition, at management and unit meetings the department will stress the importance of timeliness in completion of the OST and FROST. Supervisors shall conduct case reviews utilizing the 180-day case review checklist (enclosed) to ensure compliance.”

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory caseload reviews, unit meetings/trainings and a checklist will help ensure timely FROSTs. Remind officers to enter FROST information into the applicable APETS screens and APETS reports can be run to help assist with quality assurance and case file reviews.

### **SPS Assessment Score Matching Supervision Level**

The team reviewed supervision levels of the selected cases to determine if they agreed with assessment or reassessment scores. The post-sentence supervision assignment sheet (updated in January 2010) requires assessment scores of 0-5 (males), 0-8 (females) be supervised under standard, minimum supervision requirements. Assessment scores of 6-17 (males), 9-20 (females) will be supervised under the standard, medium supervision requirements, and assessment scores of 18 and higher (males), 21 and higher (females) will be supervised under the standard, maximum supervision requirements.

#### **Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Each of the 235 SPS cases were compared to the above standards using the current supervision level and OST/FROST, on average 90 percent of the time the supervision level matched the assessment score. The results are outlined below.

Supervision Level Matches Assessment Scores for Standard Supervision			
Requirement Met	Maximum	Medium	Minimum
Yes	22	161	26
No	3	18	1
Total	25	179	27
NA <sup>1</sup>	0	3	1
% in Compliance	88%	90%	96%

<sup>1</sup>Most recent risk score was not in the case file and/or APETS

**Department Response:** Regularly scheduled unit quality assurance audits do audit for timeliness and completeness of the OST and FROST. Those audits will continue; in addition, at management and unit



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meetings the department will stress the importance of timeliness in completion of the OST and FROST. Supervisors shall conduct case reviews utilizing the 180-day case review checklist (enclosed) to ensure compliance.

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory caseload reviews, unit meetings/trainings and a checklist will help ensure requirements are met.

## SPS Case Plan Timeline

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(a\)\(4\)](#), [ACJA § 6-201.01\(J\)\(5\)\(a\)\(7-8\)](#), [AJCA 6-201.01\(J\)\(1\)\(I\)](#)

An important aspect of case planning is to ensure that probationers are included in the development of goals and strategies. The probationer is a valuable resource in identifying solutions to the needs targeted on the OST or FROST. In addition, case plans were reviewed for EBP concerning whether or not they contained probation officer strategies to monitor compliance and accomplish the objectives and measurable strategies for the probationer and probation officer. The minimum level supervision cases were reviewed to determine if a case plan was completed if required.

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The table below shows the department's compliance regarding an initial case plan within 60 days and follow-up case plans every 180 days. Of the 411 follow-up case plans due, 107 case plans were completed within the required 180-day timeframe.

SPS Case Plans <sup>1</sup>	Yes	No	Total	% Compliance	NA <sup>2</sup>
Initial completed within 60 days	143	65	208	<b>69%</b>	27
Follow-up completed every 180 days	107	304	411	<b>26%</b>	1175
Probation officer strategies to monitor compliance and accomplish the objectives	120	84	204	<b>59%</b>	31
Measurable strategies for the probationer and probation officer	93	111	204	<b>46%</b>	31
Completed for minimum level supervision cases if required	12	10	22	<b>79%</b>	221

<sup>1</sup>The CP for the past three years were reviewed for each applicable case file.

<sup>2</sup>Another agency/county responsible for initial CP, and/or follow-up CP, CP not necessary for the applicable case and/or CP not necessary at the time of the operational review or would have been verified in an earlier operational review.

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**Department Response:** “Regularly scheduled unit quality assurance audits do audit for timeliness and completeness of the OST and FROST and case plan strategies. Those audits will continue; in addition, at management and unit meetings the department will stress the importance of timeliness in completion of the OST and FROST and measurable case plan strategies. Supervisors shall conduct case reviews utilizing the 180-day case review checklist (enclosed) to ensure compliance.”

**Required Corrective Action:** None required.

**Recommendation:** Staff training/unit meetings, regular supervisory case file reviews and a QA protocol will help ensure that the probation officer strategies to monitor compliance are measurable.

### **SPS Highest Criminogenic Need Areas Addressed on Case Plan**

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(a\)\(3\)](#)

EBP requires that areas which score higher in the OST/FROST be specifically addressed in the case record. This was reinforced in AOC case plan training sessions.

#### **Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The most recent case plan in APETS was reviewed. Of the 235 case plans reviewed, 115 have at least one score of 60 percent or above/high score/*high need* on the current OST/FROST as indicated below.

High Domain Scores on the Current OST/FROST Addressed in the Case Record	
Yes	112
No	3
Total	115
NA	120
% Compliance	97%

**Required Corrective Action:** None required.

**Recommendation:** Staff training, regular supervisory case file reviews, and a QA protocol will help ensure that probation officers are addressing highest criminogenic needs.

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## SPS Case Plan Signatures

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(a\)\(4\)](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Case plan signatures indicate the probationer and supervising officer are aware of the goals to be addressed during each contact and that the probationer participated in the case planning. The results for the 235 SPS case files reviewed are displayed below:

SPS Most Recent Case Plan Contain All Required Signatures	
Yes	180
No	26
Total	206
NA	29
% Compliance	87%

**Department Response:** “Regularly scheduled unit quality assurance audits do audit for timeliness and completeness of the OST and FROST. Those audits will continue; in addition, at management and unit meetings the department will stress the importance of timeliness in completion of the OST and FROST. Supervisors shall conduct case reviews utilizing the 180-day case review checklist (enclosed) to ensure compliance.”

**Required Corrective Action:** None required.

**Recommendation:** The department needs to ensure that probationers participate in the case planning process and sign the case plan, along with probation officers. Case file reviews and a QA protocol will help ensure that probationers are participating in the case plan reviews.

## SPS Low Risk Annual Review

Pursuant to [AJCA 6-201.01\(K\)\(8\)](#)

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**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Two hundred thirty-five files were reviewed, in which 22 were marked as low risk supervision level which requires an annual review of the case file and below are the findings:

Low Risk Probation Supervision Level Annual Review	
Yes	19
No	3
Total	22
NA	213
% in Compliance	86%

**Department Response:** “The Field Services Manual has been updated in accordance with these recommendations. Officers have been reminded of these minimum standards requirements for low risk cases.”

**Required Corrective Action:** None required.

**Recommendation:** The department needs to ensure that probationers low risk supervision case files are reviewed annually and documentation of such is included in case notes and/or the case file. Regular case file reviews and staff training will help ensure compliance.

## IPS

**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

## Photo in File

Pursuant to [ACJA § 6-202.01\(P\)\(2\)\(c\)](#)

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## **Verification of Employment**

Pursuant to [ACJA § 6-202.01\(N\)\(3\)\(b\), \(4\)\(b\), \(5\)\(b\), \(6\)\(b\)](#)

Employment was verified timely in 105 of 115 applicable case files. Employment verification was not applicable in 12 case files reviewed (e.g., job search, disabled, retired, full-time student, in treatment, health issue, self-employed).

## **Verification of Job Search/Community Restitution Six Days Per Week**

Pursuant to [A.R.S. § 13-914\(E\)\(1\)](#)

For unemployed probationers, job search/community service verification was completed for 11 of the 16 applicable case files.

## **Verification of Residence**

The relevant code in effect during the review period, [ACJA § 6-202.01\(O\)](#), requires a varied residential contact frequency based on supervision level, but none are specifically directed at residence verification upon placement on probation or release from custody. *During the review period (cases sentenced prior to January 11, 2017)*, there is no statute, code, or departmental policy regarding IPS residence verification. However, best practice indicates this should be completed within 72 hours of sentencing/release from custody as it will provide the officer with insight into a probationer's needs and overall situation.

Intensive Probation Cases				
Requirement Met	Photo in File	Employment Verified w/in 10 Days	If Unemployed, Job Search & Community Restitution 6 Days/Week	Residence Verified w/in 72 Hours
Yes	138	105	11	137
No	7	9	5	7
Total	145	114	16	144
NA	0	12 <sup>1</sup>	129 <sup>1</sup>	1
% Compliant	95%	92%	69%	95%

<sup>1</sup>not applicable includes students or disabled probationers

**Department Response:** “Periodic supervisory review of case notes and the case file will be conducted. Officers have been reminded of these minimum standards for unemployed IPS cases. The expanded definition of community restitution will ensure future compliance in this area at 90% or above. This audit finding, as well as all others, will be conveyed to all staff during management meetings, unit meetings, and a posting of the entire operational review on our intranet.”

**Required Corrective Action:** None required.

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**Recommendation:** Regular supervisory caseload reviews, unit meetings/trainings and checklist will help ensure IPS requirements are met.

## Verification of Weekly Schedules

Pursuant to [A.R.S. § 13-914\(E\)\(4\)](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

For the three-month period, 145 files were reviewed for the presence of probationers' weekly schedules. In order to be counted as completed for the month, schedules for all four weeks must be completed in detail and in the file.

IPS Schedules Submitted			
Four Schedules/Month	February 2017	March 2017	April 2017
Yes	91	103	115
No	22	21	25
Total	113	124	140
NA <sup>1</sup>	32	21	5
% Compliant	81%	83%	82%

<sup>1</sup>NA refers to intensive probationers in jail, DOC, residential treatment, or recently transitioned to standard supervision.

**Department Response:** "The current operational review notes IPS schedules were submitted at a rate of 83%. This compares favorably with the prior 2013 operational review rate of 24%. Supervisors will remind officers to continue to collect IPS schedules. This reminder along with the posting of the operational review on the intranet will ensure compliance at 90% or higher."

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory caseload reviews, unit meetings/trainings and checklist will help ensure IPS requirements are met.

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**IPS OST/FROST and Case Plan**

Pursuant to [ACJA § 6-105.01\(E\)\(2\)\(b\)\(1\)\(a\)](#), [ACJA § 6-105.01\(E\)\(2\)\(b\)\(1\)\(g\)](#), [ACJA § 6-202.01\(L\)\(2\)\(c\)](#), [ACJA § 6-202.01\(L\) \(2\) \(h\)](#), and [ACJA § 6-202.01\(L\) \(2\) \(c\)](#)

**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

A review of 145 case files revealed the following:

Requirement Met	Initial Assessment (OST) w/in 30 days or at PSI	Reassessment (FROST) <sup>1</sup> Every Six Months
Yes	85	103
No	5	132
Total	90	235
NA	55	635
<b>% Compliance</b>	<b>94%</b>	<b>44%</b>

<sup>1</sup>The FROSTs for the past three years were reviewed.

IPS Case Plans <sup>1</sup>	Yes	No	Total	% Compliance	NA <sup>2</sup>
Initial completed within 30 days	64	23	87	<b>74%</b>	58
Follow-up completed every 180 days	80	122	202	<b>40%</b>	523
Probation officer strategies to monitor compliance and accomplish the objectives	108	27	135	<b>80%</b>	10
Measurable strategies for the probationer and probation officer	63	72	135	<b>47%</b>	10
Required signatures obtained	95	42	137	<b>69%</b>	8

<sup>1</sup>The case plans for the past three years were reviewed.

<sup>2</sup>Another agency/county responsible for initial case plan, and/or follow-up case plan, case plan not necessary for the applicable case and/or case plan not necessary at the time of the operational review or would have been verified in an earlier operational review.

**Note:** Case plans completed after 1/11/2017 that did not necessitate a “follow-up” were also marked “NA” since a new case plan is not required for 12 months.

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**Department Response:** “Regularly scheduled unit quality assurance audits do audit for timeliness and completeness of the OST and FROST and case plan strategies. Those audits will continue; in addition, at management and unit meetings the department will stress the importance of timeliness in completion of the OST and FROST and measurable case plan strategies. Supervisors shall conduct case reviews utilizing the 180-day case review checklist (enclosed) to ensure compliance. The department’s quality assurance program places great weight on initial case plans and reassessments. Continued focus in this area will lead to greater compliance.”

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory caseload reviews, unit meetings/trainings and checklist will help ensure IPS requirements are met. Additionally, probationers receiving treatment and/or participating in random urinalysis testing should have a case plan completed and reviewed as required.

### **IPS Highest Criminogenic Need Areas Addressed on Case Plan**

Pursuant to [ACJA § 6-202.01\(M\)\(2\)](#)

EBP requires that areas in the OST/FROST reflecting higher scores and/or higher need be addressed in the narrative of the case plan. If not addressed, an explanation should be provided in the case plan or Contacts/Case Notes screen in APETS/case record. This was reinforced in AOC case plan training sessions.

#### **Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☒ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

#### **High Domain Scores on the Current OST/FROST Addressed in the Current Case Plan – 145 Case Plans Reviewed**

<b>Yes</b>	95
<b>No</b>	2
<b>Total</b>	97
<b>NA</b>	48

<b>% Compliance</b>	<b>98%</b>
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<sup>1</sup>The 48 cases marked N/A did not have a score of 60 percent or above on the OST/FROST or did not have “high need.”

**Required Corrective Action:** None required.



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**Recommendation:** Staff training, regular supervisory case file reviews, and a QA protocol will help ensure that probation officers are addressing highest criminogenic needs.

## Incoming Interstate

Pursuant to [ACJA § 6-204.01\(J\)\(5\)\(a\)](#), [A.R.S § 31-467.06](#), and [Interstate Commission for Adult Offender Supervision \(ICAOS\) Rule 4.106\(a\)](#), [ICAOS Rule 3.103 \(c.\)](#) and [Rule 3.106 \(b\)](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The table below lists the results of the review of 32 incoming ISC cases files.

Summary of Incoming Interstate Compact Requirements	Yes	No	Total	% Compliance	N/A
Were the Arizona Conditions Signed	32	0	32	100%	0
Is VCAF on Arizona Terms & Conditions	31	1	32	98%	0
Annual Progress Reports Completed	20	0	20	100%	12
Sending State's Terms & Conditions in File	31	1	32	98%	0
Interstate Tracking Screen Completed in APETS	32	0	32	100%	0
ISC Status Accurate in APETS (Accepted, Closed, etc.)	32	0	32	100%	0
Are VCAF Collections Current	16	16	32	50%	0
If VCAF collections are not current, has the PO addressed	13	3	16	81%	16
DNA Collected Within 30 Days	29	3	32	91%	0
OST Within 30 Days of Arrival or Acceptance	27	5	32	84%	0
ICP Within (60 days for SPS and 30 days for IPS) of Arrival or Acceptance	27	3	30	90%	2

### Department Response:

#### "Are VCAF Collections Current:

Department's Response: The department will review each file to determine which cases are not current on VCAF collections. Policy provides for a five-point financial investigation or minimally, a budget worksheet to be completed, with probationers to determine their ability to pay monthly. Supervisors will remind officers to be diligent regarding the collection of fees and assist officers with strategies to increase collections.

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The department's 180-day case review report, a sample of which is attached, include checklists containing collection information that is subject to officer and supervisor review.

**If VCAF Collections Are Not Current, Has the PO Addressed:**

Department's Response: The department will direct officers to address collections and to document these conversations and collection strategies in APETS. The supervisor will review files randomly to ensure collections are addressed and documented in APETS.

**OST Within 30 Days of Arrival or Acceptance:**

Department's Response: The department will ensure officers complete the OST within 30 days during supervisor review of the Initial Case Plan (ICP). On occasion, pursuant to ICOTS policy, probationers have 120 days to arrive in Arizona upon acceptance. This would hinder Arizona from completing the OST within the 30 days of acceptance."

**AOC Response:** Please note that "OST within 30 days" for the ISC cases, the number of days were counted from the date upon arrival **OR** acceptance whichever date that reflected 30-day compliance.

**Required Corrective Action:** None required.

It is important to note that eight of the 11 areas noted above are 90 percent or above compliant, four of which are 100 percent compliant which is commendable.

**Recommendation:** Regular supervisory reviews, in addition to a checklist could assist in ensuring all requirements are met for incoming ISC cases. Moreover, utilize ICOTS and APETS for reminder notification for applicable areas noted above.

## Outgoing Interstate

Pursuant to [ACJA § 6-204.01\(J\)\(5\)\(a\)](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The table below lists the results of the review of 32 outgoing ISC case files.

Outgoing ISC Requirements	Yes	No	Total	% Compliance	N/A
ISC status accurate (accepted, closed, etc.), ICOTS & APETS match	32	0	32	100%	0
Did probationer leave with valid reporting instructions	32	0	32	100%	0
Did the PO respond to violation reports within 10 business days	2	0	2	100%	30

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<b>Outgoing ISC Requirements</b>	<b>Yes</b>	<b>No</b>	<b>Total</b>	<b>% Compliance</b>	<b>N/A</b>
Do the conditions in ICOTS match the conditions in the case file	32	0	32	<b>100%</b>	0
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming	21	3	24	<b>88%</b>	8
If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	2	6	8	<b>25%</b>	24
DNA screen completed in APETS	31	1	32	<b>97%</b>	0
Was the Opted-in Victim notified of ISC and any other probation status issues	2	3	5	<b>40%</b>	27

**Department Response:**

**“Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming:**

Department's Response: DNA collection and verification are monitored in several ways. At the initial probation contact after acceptance, the DPS DNA database is checked for a recorded DNA sample. If a sample is on file, the DNA screen in APETS is completed. If no sample is on file, support staff collects a sample and submits the collected sample to DPS.

Occasionally, probationers do not report to the probation office immediately after acceptance. Thus, no sample is collected until the probationer reports to a field probation office. A DNA sample is collected as soon as possible.

When the Initial Case Plan (ICP) is completed, a Case Review report is printed and reviewed by a supervisor. The probationer's DNA status (collected/verified) is on this report. Probation staff make all efforts to collect a DNA sample within 30 days of sentencing/acceptance.

**If it is not the probationer's first felony offense or if DNA was previously secured by another agency, did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming:**

Department's Response: The department has undertaken a project to update all DNA screens in APETS – this process is currently in progress. We are also developing a step-by-step written process to ensure collection of all required DNA samples is completed within 30 days of sentencing, release from custody, or acceptance from another jurisdiction, and the DNA screen is reviewed and updated.

**Was the opted-in victim notified of ISC and any other probation status issues:**

Department's Response: The department will have the outgoing ISC officer review the departmental policy regarding opted-in victims. The outgoing ISC officer will be directed to input all correspondence with victims in APETS regarding all ISC matters and other probation status issues. The supervisor will monitor for compliance.”

**Required Corrective Action:** None required.

It is important to note the five of the eight areas noted above are 90 percent compliant or above, four areas 100 percent compliant which is commendable.

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**Recommendation:** Staff training, regular supervisory case file reviews, in addition to a checklist could assist in ensuring all requirements are met for incoming ISC cases. Moreover, utilize ICOTS and APETS for reminder notification for applicable areas noted above.

For Informational purposes only in relation to Court monies owed to Arizona

Outgoing Interstate Compact Monies Owed	Yes	No	Total	%	N/A
Is money owed to Arizona	21	11	32	<b>66%</b>	0
Are payments current	2	19	21	<b>10%</b>	11

**Recommendation:** Although the team could not determine whether officers are following up with probationers regarding payments, the department may want to establish a review process for probationer payments. The following is recommended to help establish a review process for payments, officers assigned to monitor outgoing accepted probationers for the department need to run financials every 60 days, more frequently for probationers who owe victim restitution, and if an offender is in arrears do the following:

- Check ICOTS for address and employment information and attempt to contact the probationer
- Follow local policies and procedures for sending a letter, etc. to make the probationer aware of his court-ordered financial obligations, resend payment balances, monthly amount due, address where to mail the payment, etc.
- In compliance with ACJA, memo the court for all probationers who are 60 days or more in arrears in restitution payments
- Submit a Compact Action Request via ICOTS to the receiving state and request their assistance with the offender pursuant to ICAOS Rule 4.108 b.
- If after all attempts to collect monies has failed, memo your local court to ascertain whether a status hearing or revocation hearing is appropriate and consider a discretionary retaking under Rule 5.101

## Closed

Pursuant to [A.R.S. §12-253 \(2\) and \(7\)](#), [A.R.S. §13-4415 \(A\)\(1-3\)](#), [A.R.S. §13-4415 \(B\)\(1-5\)](#), [A.R.S. §13-610\(C\), \(D\) and \(G through O\)](#), [A.R.S. §13-902\(C\)](#), [A.R.S. §13-805\(A\)\(1\)\(2\)](#), and [ACJA §6-201.01\(J\)\(5\)\(a\)\(12\)](#)

### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The table below list the results of the 48 case files that were reviewed.

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<b>Closed Cases</b>	<b>Yes</b>	<b>No</b>	<b>Total</b>	<b>% Compliance</b>	<b>NA</b>
Warrant Check Before Termination	20	2	22	<b>91%</b>	26
Court Ordered Treatment Completed	22	0	22	<b>100%</b>	26
Restitution Owed at Closure	3	2	5	<b>60%</b>	43
Extended for Restitution	1	1	2	<b>50%</b>	46
Other financial terms owed at closure	40	5	45	<b>89%</b>	3
CRO Entered for Outstanding Financial Balances	30	1	31	<b>97%</b>	17
Opted-In Victim Notified of Closure	11	4	15	<b>73%</b>	33
CR hours required by Statute completed by Closure	4	1	5	<b>80%</b>	43
DNA collected	40	1	41	<b>98%</b>	7

**Department Response:**

**“Restitution Owed at Closure: Those Extended for Restitution:**

Department’s Response: A great deal of focus is placed on collections, with restitution given the highest priority. Policy provides for a five-point financial investigation to determine ability to pay. In addition, we have access to Restitution Court in the event of any willful failure to pay. Within a few months, we plan to initiate an automatic text reminder regarding court-ordered assessments. Supervisors are being asked to continue to focus on collections and to work with officers with a need for improvement. A pre-term case review is generated 90 days prior to termination that contains a checklist including restitution owed, an example of which is attached. The review is subject to supervisory oversight, for which the department will ensure greater scrutiny.

**Other Financial Terms Owed at Closure:**

Department’s Response: A great deal of focus is placed on collections. Policy provides for a five-point financial investigation to determine ability to pay. Within a few months, we plan to initiate an automatic text reminder regarding court-ordered assessments. Supervisors are being asked to continue to focus on collections and to work with officers with a need for improvement.

**Opted-in Victims Notified of Closure:**

Department’s Response: The department will ensure support staff generates letters to victims when Orders of Discharge are prepared. Officers and supervisors will review each file to ensure a letter has been sent before the Order of Discharge is sent to court.

**CR Hours Required by Statute Completed by Closure:**

Department’s Response: Officers will be directed to review CR completion every six months during case reviews. The Case Review Checklist shows the number of hours completed at the time of review to which officers will be directed to address. Additionally, officers will be reminded to enter all CR hours completed in the APETS CR screen to ensure all hours completed are recorded. Early in 2017, the department modified its policy on CR to allow CR credit for self-improvement activities by the probationer such as verified work on a GED. This will increase compliance considerably.”

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory case file reviews, in addition to a checklist, could assist in ensuring all requirements are met for closed cases. Additionally, staff training should address the closed case requirements prior to case closure.

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## TREATMENT SERVICES

**SPS Treatment Referrals & IPS Treatment Referrals:** This area was not reviewed during this Operational Review.

### Transferred Youth

A transferred youth (TY) is an offender who committed an offense while a juvenile and was:

- a. Transferred to the adult court via a transfer hearing or
- b. Charged in the adult court (direct filed) while still a juvenile.

There are no ACJA codes or directives regarding TY. However, the AOC and the probation departments are working on developing guidelines for supervision of youthful offenders (based on evidence-based practices) to assist the departments in addressing the needs of this population.

Statutes relating to TY are: [A.R.S. § 8-322](#), [A.R.S. § 8-327](#), [A.R.S. § 13-501](#), [A.R.S. § 13-504](#), [A.R.S. § 13-921](#), [A.R.S. § 13-923](#), [A.R.S. § 13-3821](#), [A.R.S. § 13-3822](#), [A.R.S. § 8-302](#), and [A.R.S. § 13-350.01](#)

ACJA Codes relating to transferred youth on probation: [ACJA § 6-201.01](#), [ACJA § 6-202.01](#) and [ACJA § 6-105.01](#)

#### Findings:

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

Documentation in APETS/files was reviewed for 17 transferred youth cases (all SPS cases). The review findings are listed in the table below.

Summary of Transferred Youth Requirements	Yes	No	Total	% Compliance	NA
OST within 30 days	17	0	17	100%	0
FROST within 180 days	8	5	13	62%	4
Initial case plan within 60 days of sentencing/release from custody/acceptance	7	8	15	47%	2
Risk score agree with supervision level	16	1	17	94%	0

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<b>Summary of Transferred Youth Requirements</b>	<b>Yes</b>	<b>No</b>	<b>Total</b>	<b>% Compliance</b>	<b>NA</b>
IPS Level change based on compliance	6	0	6	<b>100%</b>	11
Probationer has GED/high school diploma	1	13	14	<b>NA<sup>1</sup></b>	3
Enrolled in school	6	9	15	<b>NA<sup>1</sup></b>	2
Enrolled in GED classes	3	11	14	<b>NA<sup>1</sup></b>	3
Employed	4	12	16	<b>NA<sup>1</sup></b>	1
Was treatment court ordered	3	14	17	<b>NA<sup>1</sup></b>	0
Attended treatment	10	2	12	<b>83%</b>	4 <sup>2</sup>
Completed treatment	4	7	11	<b>36%</b>	5 <sup>2</sup>
Is treatment reflective of best practices	9	0	9	<b>NA<sup>1</sup></b>	6 <sup>2</sup>
Screened for Title 19 or 21 (AHCCCS)	10	0	10	<b>100%</b>	6 <sup>2</sup>
Positive reinforcements used	8	3	11	<b>NA<sup>1</sup></b>	6
Intermediate sanctions used	6	6	12	<b>NA<sup>1</sup></b>	5
Petition to Revoke (PTR) filed	4	13	17	<b>NA<sup>1</sup></b>	0
Incarcerated as a result of PTR	3	0	3	<b>NA<sup>1</sup></b>	14
Is the probationer a sex offender	0	13	13	<b>NA<sup>1</sup></b>	4
If yes, has an annual court hearing (only for sex offenders) been requested by the probationer	0	0	0	<b>NA<sup>1</sup></b>	17

<sup>1</sup>For information purposes only, not a compliance issue.

<sup>2</sup>Case file information for this section was unknown rather than not applicable for a case(s)

**Department Response:** “Regularly scheduled unit quality assurance audits do audit for timeliness and completeness of the OST and FROST and case plan strategies. Those audits will continue; in addition, at management and unit meetings the department will stress the importance of timeliness in completion of the OST and FROST and measurable case plan strategies. Supervisors shall conduct case reviews utilizing the 180-day case review checklist (enclosed) to ensure compliance. The department’s quality assurance program places great weight on initial case plans and reassessments. Continued focus in this area will lead to greater compliance.”

**Required Corrective Action:** None required.

**Recommendation:** Staff training, regular supervisory case file reviews, in addition to a checklist, could assist in ensuring all requirements are met for transferred youth cases.

## **SPS Drug Testing**

Pursuant to [ACJA § 6-201.01 \(J\)\(1\)\(f\)](#)

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**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☒ Standard Not Applicable

The table below lists the results of the 235 case files reviewed.

SPS Drug Testing	
Requirement Met	Random Drug Testing Described in Case Plan/Record <sup>1</sup>
Yes	65
No	32
Total	97
NA	138
% Compliance	NA

<sup>1</sup>Case plans were considered as needing to describe drug testing frequency if the drug domain was 67 or 100 percent and/or if drug testing was described in case plan/record regardless of drug domain score.

**Department Response:** “Management has not required officers to include the drug testing frequency in the probationer’s copy of the case plan. Drug testing frequency is required for all referrals to TASC at the time of enrollment and the TASC referral form is included in the case file. Given that drug testing frequencies often change, including them in the probationer’s case plan is redundant and not practical, meaning that some probationers are better off not knowing their testing frequency.”

**AOC Response:** The Case Plan should include that random drug testing will be administered. Staff are not required to document the frequency of drug testing in the case plan.

**Required Corrective Action:** None required.

**Recommendation:** Staff training, regular supervisory case file reviews, in addition to a checklist, could assist in ensuring officers are documenting random drug testing in the probationer’s case plan.

## IPS Drug Testing

Pursuant to [ACJA § 6-202.01\(L\)\(2\)\(e\)](#)



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**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☐ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☒ Standard Not Applicable

The table below lists the results of the 145 case files reviewed.

IPS Drug Testing	
Random Drug Testing Described in Case	
Requirement Met	Plan/Record <sup>1</sup>
Yes	50
No	31
Total	81
NA	64
<b>% Compliance</b>	<b>NA</b>

<sup>1</sup>Case plans were considered as needing to describe drug testing frequency if the drug domain was 67 or 100 percent and/or if drug testing was described in case plan regardless of drug domain score.

**Department Response:** “Management has not required officers to include the drug testing frequency in the probationer’s copy of the case plan. Drug testing frequency is required for all referrals to TASC at the time of enrollment and the TASC referral form is included in the case file. Given that frequencies often change, including them in the probationer’s case plan is redundant and not practical, meaning that some probationers are better off not knowing their testing frequency.”

**AOC Response:** The Case Plan should include that random drug testing will be administered. Staff are not required to document the frequency of drug testing in the case plan.

**Required Corrective Action:** None required.

**Recommendation:** Staff training, regular supervisory case file reviews, in addition to a checklist, could assist in ensuring officers are documenting random drug testing in the probationer’s case plan.

## Drug Treatment and Education Fund (DTEF)

Pursuant to [A.R.S. § 13-901.01](#), [A.R.S. § 13-901.02](#), [ACJA § 6-205\(G\)\(1\)c\)](#)

Pursuant to the Statewide APETS Policy Minimum Use Mandates, “In order to ensure statewide consistency, all client information will be recorded and maintained in the APETS system. In addition, all counties are expected to use and complete all fields in APETS as the information is applicable and becomes available.”

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**Findings:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard: (101% and above)
- ☐ Meets Standard. Substantial compliance with the standard for the relevant review period: (100%-90%)
- ☒ Does Not Meet Standard (requires corrective action: (89%-0%) Improvement is needed in the areas noted below
- ☐ Standard Not Applicable

The department reported on the Self-Assessment Questionnaire there were 963 first-time offenders and 196 second-time offenders for a total of 1,159 ARS 13-901.01 DTEF clients served.

During the operational review period, there were 32 cases pulled that were considered to be DTEF cases. During this review, 17 mandatory DTEF cases pursuant to A.R.S §§13-901.01 (A)(F) were reviewed. Twenty cases were considered DTEF funded due to each case being screened by an employee that is in a DTEF funded position.

DTEF Cases				
13-901.01 (A)	11			
13-901.01 (F)	6			
13-901.01 (D)	15			
DTEF Funded Cases				
	Yes	No	NA	% Compliance
Screened for AHCCCS <sup>1</sup>	32	0	0	100%
Evaluation completed (instrument approved by AOC)	30	2	0	94%
Ability to pay form completed and in file	0	2	30	0%
Did mandatory A’ and F’s receive a referral for treatment/education	12	5	15	71%
DTEF funded because person completing evaluation was DTEF funded position (Pima County)	20	8	4	71%
AHCCCS Results	Eligible	Ineligible	NA	DTEF Funded when AHCCCS Eligible
If yes, “eligible” or “ineligible” or “NA”	0	5	27	0

<sup>1</sup>Reference: APSD's Client Services DTEF User Manual Version 2014-01 dated 3/24/2014

**Department Response:**

"Ability to pay form completed and in file: Supervisors will continue to stress compliance with DTEF requirements for treatment referrals with trainings and regular unit meetings, and quality assurance audits. The DTEF coordinator is tracking all DTEF cases to ensure a referral is made and treatment/education is completed and the ability to pay form is properly utilized.

Mandatory As and Fs receive a referral for treatment/education: Regularly scheduled unit quality assurance audits do audit for referrals to treatment/education. Supervisors will continue to stress compliance with DTEF requirements for treatment referrals with trainings and regular unit meetings, and quality assurance

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audits. The DTEF coordinator is tracking all DTEF cases to ensure a referral is made and treatment/education is completed.

During January 2018, the department's DTEF coordinator is meeting with each of our 16 field units to provide training on DTEF protocols, treatment screens, and other DTEF requirements. At the time of the operational review, the department was engaged in data entry to ensure full compliance with DTEF reporting requirements; that project is now complete.

DTEF funded because person completing evaluation was DTEF funded position (Pima County):

Pima County adopted the practice of conducting DTEF screenings for all probation eligible cases because of the prevalence of drug use among the population. All DTEF screenings are completed by DTEF funded staff."

**Required Corrective Action:** None required.

**Recommendation:** Regular supervisory case file reviews, in addition to a checklist, could assist in ensuring all requirements are met for DTEF cases.

## **ACKNOWLEDGEMENTS**

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The Adult Probation Services Division (APSD) of the Administrative Office of the Courts (AOC) appreciated the hospitality, collaboration, and patience of the Pima County Adult Probation staff during the operational review process.

The department submitted a thorough and complete Self-Assessment Questionnaire (SAQ), responded to all questions/requests for additional information, was open and responsive throughout the process and reviewed sections of this report as they were completed.

As a result of preliminary feedback, the department began corrective actions in many areas during the pre-draft phase prior to the publication of this report. This confirms the department's dedication to constant improvement in the delivery of probation services to Pima County.

Recommendations are provided in any areas where less than 100 percent compliance is attained. A department response is not required in areas where 90 percent or above compliance is achieved; however, we always welcome and appreciate feedback.

The operational review team appreciates the professionalism and cooperation demonstrated by your department throughout the review process.

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**COMPLIANCE SUMMARY COMPARISON**

**ADMINISTRATION AND MANAGEMENT**

	2017	2013
<b>Employment</b>		
Application for Employment Completed	100%	100%
Verification of Bachelor's Degree for PO	100%	100%
Verification High School Diploma/GED for SO	100%	100%
National and State Criminal History Check Before Hire	100%	100%
Before hire, driving records check through Arizona & Other States of Residence Check	72%	100%
<b>Officer Certification/COJET/Training Requirements</b>		
8 Hours of Officer Safety Training within 30 Days of Appointment	27%	69%
Completion of PO Certification Academy within 1 Year of Hire Date	100%	100%
Certification Requested by CPO within 1 Year of Hire Date	100%	35%
8 Hours of Defensive Tactics Refresher Training Annually	100%	87%
Firearms Annual Training	100%	100%
CPO Training Every 3 Years	100%	100%
<b>Biannual Criminal History &amp; MVD Check</b>		
Criminal History Check Every 2 Years	100%	100%
MVD Check Every 2 Years	100%	100%
<b>Pre-sentence Reports On Time</b>	100%	100%

**COMMUNITY PROTECTION**

<b>SPS Supervision Contacts</b>		
Minimum Level	100%	100%
Medium Level	95%	89%
Maximum Level	92%	85%
<b>IPS Supervision Contacts</b>		
Contacts with Probationers	96%	73%
Contact with Employers	100%	70%
<b>Sex Offender Requirements</b>		
Registration within 10 Days	76%	83%
Verify residence within 30 days (SPS), 72 hours (IPS)	89%	94%
Address/Name Change Notification Change within 72 hours	88%	67%
Yearly Identification	89%	83%
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming	85%	43%
If it is not the probationer's 1st felony offense did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	65%	NA
DNA screen completed in APETS	99%	NA
Annual Polygraphs	58%	51%
Referred to Treatment	100%	97%
<b>GPS Compliance</b>		
GPS attribute marked in APETS	100%	100%

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Probationer activated on initial report w/in 72 hours of sentencing/release from custody	100%	88%
Probationer activated upon first face to face with probation officer after Court Ordered Modification	100%	NA
GPS rules signed by probationer	97%	75%
For documented violations, PO initiate immediate response	70%	NA
Was response appropriate	100%	100%
PO respond to alerts within 24 hours	100%	100%
Responses entered into APETS within 72 hours	100%	100%
If absconder, PTR with 72 hours	100%	NA

**Signed Review/Acknowledgement of Terms of Conditions**

SPS	58%	57%
IPS	68%	86%

**DNA Collection**

**SPS**

Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming	89%	NA
If it is not the probationer's 1st felony offense did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	33%	NA

**IPS**

Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming	80%	NA
If it is not the probationer's 1st felony offense did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	43%	NA

**Activity to Locate Before Warrant Issued**

IPS - Warrant Requested within 72 Hours	0%	90%
SPS - Warrant Requested within 3 Months	71%	92%
Residence Checked	87%	76%
Collaterals Checked	75%	56%
Employment Checked	37%	57%
Certified Letter Sent	32%	0%

**Activity of Locate After Warrant Issued**

After warrant issued, a criminal history check done	34%	NA
Residence Checked	4%	14%
Employment Checked	0%	29%
Opted-In Victim Notified	83%	100%
Annual Records Check	20%	14%
If warrant after 7/20/2011, CRO Filed within 90 days	54%	62%

**VICTIMS' RIGHTS**

**SPS**

Pre-sentence Contact	89%	66%
Notice of Changes Given	84%	58%

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**IPS**

Pre-sentence Contact	98%	100%
Notice of Changes Given	94%	100%

**OFFENDER ACCOUNTABILITY**

**SPS Financials**

Victim Notified if Restitution Two Months in Arrears	31%	36%
Court- Notification if Restitution Two Months in Arrears	39%	43%
Probation Supervision Fees (PSF) Current	39%	NA
Officers Addressed Financial Delinquencies	86 <sup>1</sup> %	83%

<sup>1</sup>(includes PSF and restitution delinquencies)

**IPS Financials**

Court Notified if Restitution Two Months in Arrears	NA	78%
Victim Notified if Restitution Two Months in Arrears	NA	89%
Restitution Current	NA	47%
Probation Supervision Fees (PSF) Current	0%	NA
Collection of IPS Probationer Wages	0%	NA
Officers Addressed Financial Delinquencies	100%	81%

<sup>1</sup>(includes PSF and restitution delinquencies)

**SPS CR Hours**

Average Completed – 3-month review period	19%	18%
Officers Addressed Delinquent Hours	68%	67%

**IPS CR Hours**

Average Completed – 3-month review period	49%	39%
Officers Addressed Delinquent Hours	78%	46%

**CASE MANAGEMENT**

**SPS Cases**

Residence Verification within 30 days of Sentencing/Release from Custody <sup>87</sup>	61%	71%
Initial Employment Verification	53%	35%
OST Completed within 30 Days	89%	96%
FROST Completed 180 Days	33%	34%
Supervision Level Matches Assessment Scores	91%	92%
Initial Case Plan Completed within 60 Days	69%	73%
Case Plan Completed at 180 Days	26%	32%
PO Strategies for the Probationer and PO	59%	87%
Measurable Strategies for the Probationer and PO	46%	43%
Completed Case Plan for Minimum Supervision Level if Necessary	79%	74%
OST/FROST Highest Criminogenic Need Addressed in Case Plan	97%	92%
Case Plan Signatures	87%	NA

**IPS Cases**

Photo in File	95%	96%
Verification of Employment within 10 Days	92%	83%
Unemployed & 6 days/week Job Search & CR	69%	60%
Verification of Residence within 72 Hours	95%	85%
Collection of Weekly Schedules	83%	24%
Initial Assessment (OST) within 30 Days or at PSI	94%	91%
Reassessment (FROST) Every 180 Days	44%	48%

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Initial Case Plan	74%	47%
Case Plan Every 180 Days	40%	43%
PO Strategies for the Probationer and PO	80%	NA
Measurable Strategies for the Probationer and PO	47%	NA
Case Plan Signatures	69%	41%
OST/FROST Highest Criminogenic Need Addressed on Case Plan	98%	77%

**Incoming ISC Cases**

Were the Arizona Conditions Signed	100%	97%
Is VCAF on Arizona Terms & Conditions	98%	43%
DNA Collected Within 30 Days	91%	76%
OST Within 30 Days of Arrival or Acceptance	84%	86%
Initial Case Plan Within 60 days of Arrival or Acceptance	90%	77%
Annual Progress Reports Completed	100%	82%
Sending State's Terms & Conditions in File	98%	82%
Interstate Tracking Screen Completed in APETS	100%	100%
ISC Status Accurate in APETS (Accepted, Closed, etc.)	100%	100%
Are VCAF Collections Current	98%	29%
If VCAF Collections Are Not Current, Has PO Addressed	81%	42%

**Outgoing ISC Cases**

ISC Status Accurate (Accepted, Closed, etc.)	100%	100%
Did probationer leave with valid reporting instructions	100%	100%
Did the PO respond to violation reports within 10 business days	100%	100%
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of incoming	88%	100%
If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	25%	NA
DNA screen completed in APETS	97%	NA

**Closed Cases**

Warrant Check Before Termination	91%	83%
DNA collected/verified	98%	98%
Court Ordered Treatment Completed	100%	95%
CR Hours Required by Statute Completed by Closure	80%	86%
Opted-In Victim Notified of Closure	73%	75%
If Restitution Owed at Closure, Extended for Restitution	50%	NA
Other Financial Terms Owed at Closure	89%	54%
CRO Entered for Outstanding Financial Balances	97%	92%

**TREATMENT SERVICES**

**SPS Cases**

Treatment Referral within 60 Days	NA	55%
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**IPS Cases**

Treatment Referral within 60 Days	NA	47%
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**Transferred Youth Cases**

OST within 30 days	100%	NA
FROST within 180 days	60%	NA

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Initial case plan within 60 days of sentencing/release from custody/acceptance	47%	NA
Risk score agree with supervision level	94%	NA
IPS Level change based on compliance	100%	NA
Attended treatment	83%	NA
Completed treatment	36%	NA
Screened for Title 19 or 21 (AHCCCS)	100%	NA

**SPS Drug Testing**

Frequency Described in Case Plan	67%	82%
Drug Tested as Described in Case Plan	90%	96%

**IPS Drug Testing**

Frequency Described in Case Plan	62%	47%
Drug Tested as Described in Case Plan	95%	57%

**DTEF Funded Cases**

Screened for AHCCCS	100%	98%
Client Services Screen in APETS Completed	94%	100%
Evaluation Completed (Instrument Approved by AOC)	71%	96%
Ability to Pay Form Completed and in File	0%	0%
Did mandatory A' and F's receive a referral for treatment/education	71%	NA